**Patient Name:** COLON, VICTOR

**Date of Birth:** 06/24/1959

**Date of Service:** 03/28/2022

**History of Present Illness:**  
The patient is seen here for postoperative Orthopedic follow-up evaluation. Patient is status post left knee meniscectomy on 03/07/22. Patient has not started PT yet, needs script.

Patient complains of left knee pain that is 3/10 with 10 being the worse, which is \_\_\_\_\_intermittent in nature.

**Past Medical History:**  
Noncontributory

**Past Surgical History:**  
Left hip surgery 2 years ago, right hip surgery 16 years, left knee surgery 2 years ago.

**Past Accident/Injuries:**

**Daily Medications:**  
Percocet 10/325, Xanax 0.5 mg

**Allergies:**  
No known drug allergies

**Social History:**  
Patient is not working.

**Physical Examination:**  
**Vitals:** On physical examination, the patient is 5 feet 11 inches tall, weighs 207 pounds   
**General Appearance:** Patient is a well-developed, well-nourished male in no acute distress. Awake, alert,   
and oriented x 3. Mood and affect are normal.  
**Gait and Station:** Gait is normal

**Left Knee:**  
Examination of the knee revealed improvement, no tenderness on palpation. There was no effusion. There was no atrophy of the quadriceps noted. Lachman’s test was negative. Anterior drawer sign and Posterior drawer sign were each negative. Patellofemoral crepitus was not present. Valgus & Varus stress test was stable. Range of motion: Flexion 100 degrees (150 degrees normal), extension 0 degrees (0 degrees normal).

**Diagnostic Imaging:**  
05/12/21- Left knee MRI revealed oblique tear posterior horn and body medial meniscus. Grade 2 sprain of ACL and grade 1 sprain of MCL. Mild to moderate tricompartmental articular chondrosis most pronounced medially. Small joint effusion and small Baker’s cyst. Several loose bodies posteriorly larges lies within the Baker's cyst.

**Assessment and Plan:**  
Diagnosis: Status post left knee meniscectomy.  
Plan: Begin PT. Send Naproxen 500 mg b.i.d.

The patient’s Left Knee was examined   
MRI of the Left Knee was reviewed.   
Patient is to return to the office PRN.

Causality: It is within a certain degree of medical certainty, that the history presented by the patient, the objective physical findings as well as the diagnosis rendered is causally related to the injury the patient incurred on the specified date. These current symptoms were nonexistent prior to the accident. Findings were discussed with the patient. Patient is considered 100% temporarily disabled.  
  
In response to the required COVID-19 mandates the following precautions have been taken. Doctors and Medical Assistants wore masks and gloves; examination rooms are completely disinfected after each use. Patient was required to wear a mask. Temperature scan was administered prior to examination. No more than 10 people were permitted in the waiting room at any time as this is the max that can be achieved while still maintaining six (6) feet social distancing guidelines. Only the patient was permitted in the examination room.



**L Sean Thompson, M.D.**