**Patient Name:** DOUGLAS, ALWYN

**Date of Birth:** 12/08/1959

**Date of Service:** 04/25/2022

**History of Present Illness:**  
This is a 63 year-old right hand dominant male who was involved in a motor vehicle /work related accident on 09/13/2019. Patient injured Left Knee in the accident. The patient is here today for orthopedic evaluation. Patient states cortisone has helped a little. Patient was advised about gel injection, but never did and was recommended total knee replacement.

The patient complains of left knee pain, which is sharp, dull and shooting in nature. The left knee pain increases with going up/down stairs.

**Past Medical History:**  
Arm or leg weakness.

**Past Surgical History:**  
Noncontributory

**Past Accident/Injuries:**

**Daily Medications:**  
Folic acid, vitamin B12

**Allergies:**  
No known drug allergies

**Social History:**  
Nonsmoker.

**Physical Examination:**  
**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 tenderness on palpation of medial and lateral compartment. 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 present. Valgus & Varus stress test was stable. Range of motion Flexion 120 degrees (150 degrees normal ) Extension -5 degrees (0 degrees normal )

**Diagnostic Imaging:**  
12/09/2021 - MRI of the left knee reveals mild chondromalacia. Complex tear at the lateral meniscus with displaced portion. Smaller tear at the medial meniscus with probable displaced portion. Partial interstitial tear of the ACL. MCL sprain. Joint effusion. Abnormal bone marrow is noted of uncertain etiology. Hematologic evaluation is recommended including routine CBC.

**Assessment and Plan:**  
Diagnosis: Osteoarthritis, medial and lateral meniscal tear.  
Plan: Recommend x-ray of left knee.

The patient’s Left Knee was examined   
MRI of the Left Knee was reviewed.   
Patient is to return to the office in 4 weeks.

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.**