**Patient Name:** FOLEY (DOA 1-12-22) CASE 2, TIMOTHY

**Date of Birth:** 12/26/1962

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

**History of Present Illness:**  
The patient is here today for orthopedic follow-up evaluation. Patient had 2 intraarticular injections x2 and no PT.

The patient complains of right knee pain that is 8/10 with 10 being the worst, which is constant and shooting in nature. The knee pain radiates down leg along with tingling in knee cap. Patient had morning stiffness in right knee and knee buckles when walking.

**Past Medical History:**  
High blood pressure, heart attacks, arthritis.

**Past Surgical History:**  
Right wrist surgery (6 surgeries), C6-7 fusion, low back surgery.

**Past Accident/Injuries:**

**Daily Medications:**  
Percocet, amitriptyline.

**Allergies:**  
No known drug allergies

**Social History:**  
Smoker, half a pack per day. Patient is not working.

**Physical Examination:**  
**Vitals:** On physical examination, the patient is 6 feet tall, weighs 248 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

**Right Knee:**  
Examination of the knee revealed 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 present. Valgus & Varus stress test was stable. Range of motion: Flexion 120 degrees (150 degrees normal). Patient had pain with extension.

**Diagnostic Imaging:**  
03/18/2022 - MRI of the right knee reveals cartilage fissure over weightbearing lateral tibia with marrow edema and no fracture. Lateral subluxation of patella with patella alta. Patellofemoral cartilage loss with joint effusion.

**Assessment and Plan:**  
Diagnoses: Patellofemoral syndrome and posttraumatic arthritis.  
Plan: Recommend PRP.

The patient’s Right Knee was examined   
MRI of the Right 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.**