**Patient Name:** GOUVEIA, NUNO

**Date of Birth:** 10/29/1982

**Date of Service:** 05/17/2022

**History of Present Illness:**  
This is a 39 year-old male who was involved in a motor vehicle on 12/13/21. The patient states he was the restrained driver of a vehicle, which was involved in a passenger side collision. Patient injured Right Shoulder in the accident. The patient is here today for orthopedic evaluation.

The patient complains of right shoulder pain that is 7/10 with 10 being the worst, which is sharp and shooting in nature. Shoulder pain radiates into biceps. Shoulder pain increases by lifting 20+ pounds and sleep. \_\_\_\_\_Points to posterior aspect. Patient complains of nocturnal awakening.

**Past Medical History:**  
Diabetes.

**Past Surgical History:**  
Noncontributory

**Past Accident/Injuries:**

**Daily Medications:**  
Insulin injection.

**Allergies:**  
No known drug allergies

**Social History:**  
Vapes and social alcohol.

**Physical Examination:**  
**Vitals:** On physical examination, the patient is 5 feet 7 inches tall, weighs 195 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 Shoulder:**  
Examination of the shoulder revealed no tenderness to palpation. There was no effusion. No crepitus was present. No atrophy was present. Hawkins, drop arm, and apprehension tests were negative. Range of motion: Abduction 160 degrees (180 degrees normal), forward flexion 160 degrees (180 degrees normal), internal rotation 70 degrees (80 degrees normal), external rotation 70 degrees (90 degrees normal) .

**Diagnostic Imaging:**  
02/16/2022 - MRI of the right shoulder reveals AC joint arthrosis. 2-mm traction cyst at the insertion of infraspinatus with no fracture. 3-nnn articular low-grade tear of supraspinatus proximal to the anterior insertion. Capsular thickening anterior which can be seen with adhesive capsulitis.

**Assessment and Plan:**  
Diagnosis: Internal derangement, right shoulder.  
Plan: Request surgery as the patient has persistent pain, weakness, and unable to perform duties at work. Patient will return to work on 07/18/2022. Recommend PT.

The patient’s Right Shoulder was examined   
MRI of the Right Shoulder was reviewed.

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.**