**Patient Name:** MARTINEZ-SANCHEZ, ESTELA

**Date of Birth:** 01/05/1980

**Date of Service:** 01/24/2022

**History of Present Illness:**  
The patient presents for follow-up for left knee pain. Patient was a back seat passenger of a vehicle which was involved in a rear end collision on 08/27/2021. Her knees hit front passenger seat.

Patient complains of left knee pain.

**Past Medical History:**  
Noncontributory

**Past Surgical History:**  
Gallbladder surgery.

**Past Accident/Injuries:**

**Daily Medications:**  
None

**Allergies:**  
No known drug allergies

**Social History:**  
Noncontributory.

**Physical Examination:**  
**Vitals:** On physical examination, the patient is 5 feet 1 inch tall, weighs 200 pounds   
**General Appearance:** Patient is a well-developed, well-nourished female 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 no tenderness on palpation. There was no effusion. There was no atrophy of the quadriceps noted. Lachman’s test was negative. McMurray's test was negative at medial/lateral left knee. 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 110 degrees (150 degrees normal), Extension 0 degrees (0 degrees normal) with pain.

**Diagnostic Imaging:**  
09/28/2021 - MRI of the left knee reveals intrameniscal tear of posterior horn of the medial meniscus. Mild osteoarthritic changes. Moderate joint effusion consistent with trauma or synovitis, in an appropriate clinical setting.  
09/28/2021 - MRI of the right knee reveals intrameniscal tear of anterior horn, body and posterior horn of the medial meniscus. Mild osteoarthritic changes. Anterior subcutaneous soft tissue swelling and edema consistent with recent trauma or bursitis, in an appropriate clinical setting. Moderate joint effusion consistent with recent trauma, in an appropriate clinical setting.

**Assessment and Plan:**  
Diagnosis: Meniscus tear, left knee.  
Plan: Left knee arthroscopy.

The patient has failed conservative management which has included physical therapy, oral medications. The MRI was reviewed with the patient as well as the clinical examination findings. I have gone over all treatment options with the patient. At this time, I have discussed the benefits and risks of Left knee arthroscopy, chondroplasty, synovectomy, partial vs total meniscectomy and all other related procedures with the patient. I answered all their questions in regards to the procedure. The patient verbally consents to the procedure.

The patient’s Left Knee was examined   
MRI of the Left Knee was reviewed.   
The patient at the present time is advised to undergo MC.  
Patient is to return to the office in 6 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.**