**Patient Name:** PALACIOS, ALEJANDRO

**Date of Birth:** 02/26/1988

**Date of Service:** 12/27/2021

**History of Present Illness:**  
The patient is here for follow-up orthopedic evaluation. Patient states that PT helped for 2 months and now only tries massage therapy.

The patient complains of right knee pain that is 7/10, with 10 being the worst.

**Past Medical History:**  
Noncontributory

**Past Surgical History:**  
Noncontributory

**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 3 inches tall weighs 208 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 not present. Valgus & Varus stress test was stable. Range of motion Flexion \_\_ degrees(150 degrees normal ) Extension \_\_ degrees(0 degrees normal ) The calf touches the back of the thigh at \_\_ degrees of flexion (normal for the patient).

**Diagnostic Imaging:**  
06/05/2021 MRI of the Right Knee reveals horizontal tear in the posterior horn of the medial meniscus. Mild joint effusion consistent with recent trauma or synovitis, in an appropriate clinical setting. Anterior subcutaneous soft tissue swelling and edema, consistent with recent trauma, in an appropriate clinical setting.

**Assessment and Plan:**  
Diagnosis: Tear of medial meniscus/ inflammation.  
   
Plan: Discussed right knee arthroscopy. Prescription given for naproxen and told to take half an hour before therapy.

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 Right 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 and will be scheduled on \_\_\_\_\_\_\_.

The patient’s Right Knee was examined   
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.**