**Patient Name:** ROSHAYNE, HAMILTON

**Date of Birth:** 11/15/1995

**Date of Service:** 07/18/2022

**History of Present Illness:**  
The patient is seen here for Orthopedic follow up evaluation of left knee pain.

**Past Medical History:**  
Noncontributory

**Past Surgical History:**  
Noncontributory

**Past Accident/Injuries:**

**Daily Medications:**  
None

**Allergies:**  
No known drug allergies

**Social History:**  
Noncontributory.

**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 the medial joint line. There was no effusion. There was no atrophy of the quadriceps noted. Lachman’s test was positive with no endpoint. 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 120 degrees (150 degrees normal) and extension 0 degrees (0 degrees normal).

**Diagnostic Imaging:**  
04/14/2022 - MRI of the left knee reveals complete proximal and midsubstance anterior cruciate ligament tear with nondisplaced fracture at the base of the medial tibia spine with diffuse marrow edema. Contusion of anterior medial femur, posterior lateral femur and tibiof?ibular joint. Dif?fuse soft tissue edema with joint effusion. Medial collateral ligament sprain at the femur. Moderate-to-high grade proximal lateral collateral ligament tear. Moderate-grade tear of the popliteus at its insertion. Moderate-grade tearing of the lateral gastrocnemim at the femur. Low-grade tearing of the medial gastrocnemius at their insertions. Diffuse posterior sof?t tissue edema. Ruptured popliteal cyst.

**Assessment and Plan:**  
Diagnoses: Complete anterior cruciate ligament tear, meniscus tear, medial collateral ligament sprain, and partial lateral collateral ligament tear, left knee.  
Plan: Left knee anterior cruciate ligament reconstruction.

The patient’s Left Knee was examined   
MRI of the Left Knee was reviewed.   
Patient is to return to the office 2 weeks' postop.

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.**