**Patient Name:** TAYLOR, KEESHA

**Date of Birth:** 01/04/1971

**Date of Service:** 02/23/2022

**History of Present Illness:**  
The patient is seen here for Orthopedic follow up evaluation. Patient was a restrained front seat passenger with seatbelt on of the vehicle involved in a rear passenger side collision. Patient reports head injury. Patient has tried PT for right shoulder.

The patient complains of right shoulder pain that is 8/10. The shoulder pain increases with moving, lifting and overhead activities. The shoulder pain improves with medication and heat.

**Past Medical History:**  
Hypertension, COPD, asthma, and stroke.

**Past Surgical History:**  
Hernia repair 1986

**Past Accident/Injuries:**

**Daily Medications:**  
Pain medications, metoprolol tartarate 100 mg, lisinopril 20-25 mg.

**Allergies:**  
No known drug allergies

**Social History:**  
Social drinking. Nonsmoker. Patient is working.

**Physical Examination:**  
**Vitals:** On physical examination, the patient is 5 feet tall, weighs 170 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.

**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.

**Diagnostic Imaging:**  
07/16/2019: MRI of the right shoulder reveals: High-grade articular surface partial thickness tear involving the anterior to mid fibers of the distal supraspinatus tendon, resulting in a 9 mm defect. Interstitial partial thickness tear involving the mid to distal infraspinatus tendon. Diffuse tendonitis involving the supraspinatus and infraspinatus tendons. Moderate impingement of the supraspinatus outlet. Subacromial/subdeltoid bursitis. Biceps tenosynovitis.

**Assessment and Plan:**  
Diagnosis: Partial thickness tear, impingement, and biceps tenosynovitis, right shoulder.  
Plan: PT and if possible, surgery

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