**Patient Name:** VELOZ, CLARIBEL

**Date of Birth:** 07/28/1966

**Date of Service:** 08/29/2022

**History of Present Illness:**  
This is a 56 year-old right hand dominant female who presents here today for orthopedic evaluation. Patient complains of random onset of bilateral knee pain. Patient has tried 1month of PT for worsened pain and had left knee injection.

The patient complains of bilateral knee pain that is 7/10, with 10 being the worst, which is throbbing in nature along with numbness. Knee pain wraps around knees. Knee pain increases with climbing stairs, excessive walking.

**Past Medical History:**  
High blood pressure.

**Past Surgical History:**  
Noncontributory

**Past Accident/Injuries:**

**Daily Medications:**  
Lisinopril, hydrochlorothiazide.

**Allergies:**  
No known drug allergies

**Social History:**  
Noncontributory.

**Physical Examination:**  
**Vitals:** On physical examination, the patient is 5 feet 6 inches tall, weighs 300 pounds, BMI 48.4  
**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 and Right Knee:**  
Examination of the right knee revealed tenderness on palpation to lateral joint line and medial joint line. Buckling of the knee is present. There was no effusion. There was no atrophy of the quadriceps noted. Lachman’s test was negative. McMurray test is positive on medial right 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 120 degrees (150 degrees normal ) Extension 0 degrees (0 degrees normal ).  
  
Examination of the left knee revealed tenderness on palpation to lateral joint line. Buckling of the knee is present. There was no effusion. There was no atrophy of the quadriceps noted. Lachman’s test was negative. McMurray test is positive on medial 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 130 degrees (150 degrees normal ) Extension 0 degrees (0 degrees normal )

**Diagnostic Imaging:**

**Assessment and Plan:**  
Diagnosis: Bilateral knee pain.  
Recommend bilateral knee x-rays.  
Recommend PT.

The patient’s Left Knee, Right Knee were examined   
Patient is to return to the office in 1 week.

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.   
  
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.**