**Patient Name:** WRIGHT, CHARITY

**Date of Birth:** 12/06/1954

**Date of Service:** 05/17/2022

**History of Present Illness:**  
This is a 68 year-old right hand dominant female who presents today for orthopedic follow-up evaluation. Patient is status post left shoulder arthroscopy. Wounds are healing. .

The patient complains of left shoulder pain that is 6-10/10, with 10 being the worst, which is sharp and shooting in nature. The left shoulder pain increases with lifting.

**Past Medical History:**  
Diabetes, high blood pressure, high cholesterol.

**Past Surgical History:**  
C-section.

**Past Accident/Injuries:**

**Daily Medications:**  
Oxycodone, lisinopril, atorvastatin.

**Allergies:**  
Sulfur causes tongue swelling.

**Social History:**  
Patient is not working. Retired.

**Physical Examination:**  
**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 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. Range of motion Abduction 90 degrees(180 degrees normal ) Forward flexion 100 degrees(180 degrees normal ) Internal rotation 30 degrees (80 degrees normal ) External rotation 30 degrees(90 degrees normal ), Passive forward flexion 120 degrees, abduction 115 degrees. Strength not assessed.

**Diagnostic Imaging:**  
02/14/2022 - MRI of the left shoulder reveals AC joint arthrosis with lateral acromial spur. Rotator cuff tendinopathy and fraying with traction spurring at the supraspinatus insertion. Fraying and tear of superior labrum and inferior labrum. Biceps tendinopathy, tenosynovitis and ill-defined diffuse tear at the horizontal segment and anchor. Capsular thickening which can be seen with adhesive capsulitis. Arthrosis of glenohumeral joint with joint effusion.

**Assessment and Plan:**  
Diagnosis: 1. Status post left shoulder arthroscopy.  
   
Recommend PT.

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