

UK Sinha Physician, P.C.

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August 26, 2022

Re: Etienne, Magalie
DOB: 11/29/1971
DOA: 05/25/2022

FOLLOW-UP NOTE

CHIEF COMPLAINT: Follow up of left elbow pain.

HISTORY OF PRESENT ILLNESS: The patient presents today in followup with continued pain in the left elbow. The patient came for cortisone injection. This patient comes from Merrick Medical PC, 243-51 Merrick Blvd, Rosedale, NY 11422.

ADL CAPABILITIES: The patient states that she can walk for 2 blocks. She can stand for 30 minutes before she has to sit. She can sit for 15 minutes before needing to change positions secondary to pain. As a direct result of the injuries sustained in this accident, the patient states that she is unable to do the following activities: lifting heavy objects, carrying heavy objects, reaching overhead, laundry, shopping, running errands, and exercising

PRESENT COMPLAINTS: Left elbow: Left elbow pain is 8/10, described as constant, dull, achy pain. Denies weakness, numbness, and tingling. The patient has pain with lifting, carrying, and driving. The patient has posttraumatic lateral epicondylitis left elbow.

PHYSICAL EXAMINATION: The left elbow reveals muscle strength is 4/5. There is tenderness to palpation over the lateral epicondyle. Negative Varus test. Negative Valgus test. Negative Tinel sign. Range of motion reveals flexion 140/150 degrees, extension - 10/150 degrees, supination 90/90 degrees, pronation 70/90 degrees.

DIAGNOSTIC TESTING: Pending.

ASSESSMENT:

1. Lateral epicondylitis, left elbow.

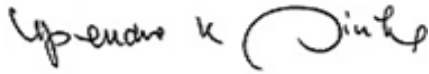
PLAN:

1. Imaging studies and clinical examinations were reviewed with the patient.
2. All treatment options discussed with the patient.
3. Cold compresses for left elbow.
4. Continue anti-inflammatory and muscle relaxant medications p.r.n.
5. Continue physical therapy for left elbow 3 days/week.

6. The patient had cortisone injection today to the left elbow (lateral) of 0.25% Marcaine 3 mL and 1/2 mL of Depo-Medrol mixed together.
7. The patient is diabetic.
8. Follow up in 4 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.

AFFIRMATION: Being duly licensed to practice medicine in the state of New York, pursuant to the applicable provisions of the Civil Practice Laws and Rules, I hereby affirm under penalty of perjury that the statements contained herein are true and accurate.

A handwritten signature in black ink, appearing to read "U.K. Sinha", written over a horizontal line.

U.K. Sinha, MD, MS (Ortho), FAAOS
Board Certified Orthopedic Surgeon

UKS/AEI