

# UK Sinha Physician, P.C.

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September 20, 2022

Office seen at:  
Renew Chiropractic P.C.  
2426 Eastchester Road, Suite 204  
Bronx, NY 10469  
Phone# (347) 843-6230

Re: Givens, Jeanine  
DOB: 05/23/1964  
DOA: 09/08/2021

## FOLLOW-UP NOTE

**CHIEF COMPLAINT:** Follow up of left shoulder and right wrist pain.

**HISTORY OF PRESENT ILLNESS:** The patient presents today in follow up with continued pain in the right wrist and for evaluation of pain in the left shoulder. The patient is status post left shoulder arthroscopy on 06/10/2022.

**ADL CAPABILITIES:** As a direct result of the injuries sustained in this accident, the patient states that she is unable to do the following activities: driving, lifting heavy objects, carrying, reaching overhead, laundry, shopping, running errands, and exercising.

**PRESENT COMPLAINTS:** Left shoulder: Left shoulder pain is 4-5/10, described as intermittent, sharp, stabbing, dull, achy pain. The patient has stiffness, weakness, popping. The patient is unable to reach overhead or behind the back. Worse with range of motion and improves with rest, medication, physical therapy, and ice.

Right wrist: Right wrist pain is 6-7/10, described as intermittent, dull, achy pain. The patient has pain with lifting, carrying, and driving. Worse with range of motion and improves with rest, medication, physical therapy, and ice.

**PHYSICAL EXAMINATION:** The left shoulder is non-tender. There is no swelling, heat, erythema, crepitus or deformity appreciated. Negative drop arm test. Negative cross-over test. Negative empty can test. Negative Yergason test. Negative deltoid atrophy. Negative O'Brien test. Positive impingement sign. Negative Lift-off test. Negative Hawkins test. Range of motion, as per goniometer, abduction 150/180 degrees, adduction 40/45 degrees, forward flexion 160/180 degrees, extension 50/60 degrees, internal rotation 80/90 degrees, and external rotation 80/90 degrees. The patient has no motor or sensory deficit of the left upper extremity.

The right wrist reveals pain to palpation over the distal radius and scaphoid. Negative Tinel sign. Negative Phalen test. Range of motion reveals flexion 60/80 degrees, extension 45/70 degrees, radial deviation 15/20 degrees, ulnar deviation 25/30 degrees.

**DIAGNOSTIC TESTING:** MRI of the right wrist, done on 06/01/2022, shows extensor tendon sheaths are mildly distended with fluid, consistent with tenosynovitis. Fluid in intercarpal and distal radioulnar joints consistent with recent trauma or synovitis, in an appropriate clinical setting. Subcutaneous and deep soft tissue swelling and edema over radial aspect of the joint, consistent with recent trauma, in an appropriate clinical setting.

**ASSESSMENT:**

1. M24.812 Internal derangement, left shoulder.
2. M75.42 Impingement, left shoulder.
3. M25.512 Pain, left shoulder.
4. S49.92XA Injury, left shoulder.
5. Mild osteoarthritis carpometacarpal joint, right wrist.
6. De Quervain's disease, right wrist.

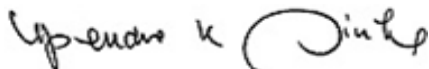
**PLAN:**

1. Imaging studies and clinical examinations were reviewed with the patient.
2. All treatment options discussed with the patient.
3. Cold compresses for left shoulder and right wrist.
4. Continue anti-inflammatory and muscle relaxant medications p.r.n.
5. Continue physical therapy for left shoulder and right wrist 3 days/week.
6. Follow up on 09/21/2022 with CD.

**IMPAIRMENT RATING:** 100%. The patient is currently not working.

**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.



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