

# UK Sinha Physician, P.C.

102-31 Jamaica Ave.  
Richmond Hill, NY 11418  
Ph: 718-480-1130 Fax: 718-480-1132  
[usinhaorthopedics@gmail.com](mailto:usinhaorthopedics@gmail.com)

---

June 13, 2022

Office seen at:  
Multispecialty Clinic  
102-28 Jamaica Avenue  
Jamaica, NY 11418  
Phone# (718) 441-5440

Re: Sarmiento, Claudia  
DOB: 03/31/1982  
DOA: 04/14/2022

## INITIAL ORTHOPEDIC CONSULT EXAMINATION

**CHIEF COMPLAINT:** Right shoulder, right knee and right wrist pain.

**HISTORY OF PRESENT ILLNESS:** A 40-year-old right-hand dominant female involved in a motor vehicle accident on 04/14/2022. The patient was a driver and was wearing a seatbelt. The vehicle was struck on the front driver's side. The airbags deployed. The EMS arrived. The police were called to the scene of the accident. The patient was transported via ambulance to Brooklyn Hospital and was treated and released the same day. The patient presents today complaining of right shoulder, right knee, and right wrist pain sustained in the motor vehicle accident. The patient was attending physical therapy for the last 4 times a week with little relief.

**WORK HISTORY:** The patient is currently not working.

**PAST MEDICAL HISTORY:** Noncontributory.

**PAST SURGICAL HISTORY:** Noncontributory.

**DRUG ALLERGIES:** NO KNOWN DRUG ALLERGIES.

**MEDICATIONS:** The patient is not taking any medication at this time.

**SOCIAL HISTORY:** The patient is a nonsmoker. The patient drinks alcohol occasionally. The patient does not use recreational drugs.

**ADL CAPABILITIES:** The patient states that she can walk for 2 blocks. She can stand for 1/2 minutes before she has to sit. She can sit for 5 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: play sports, driving, lifting heavy objects, carrying heavy objects, reaching overhead, shopping, running errands, kneeling, squatting, negotiating stairs, and jogging.

**PRESENT COMPLAINTS:** Right shoulder: Right shoulder pain is 6/10, described as constant, sharp, stabbing, dull, achy pain. The patient has stiffness, weakness, popping, and clicking. The patient is unable to reach overhead or behind the back and unable to sleep at night due to pain. Worse with range of motion and improves with rest, medication, physical therapy, and ice.

Right knee: Right knee pain is 6/10, described as constant, sharp, stabbing, dull, achy pain. The patient has stiffness and weakness. The patient has difficulty rising from a chair and difficulty going up and down stairs. The patient also notes clicking, popping, and buckling. Worse with range of motion and improves with rest, medication, physical therapy, and ice.

Right wrist: Right wrist pain is 9/10, described as intermittent, dull, achy pain. Admits to weakness. The patient has pain with lifting, carrying, and driving. Worse with range of motion and improves with rest, medication, physical therapy, and ice.

**REVIEW OF SYSTEMS:** Temperature taken at the time of exam was 98.6 degrees Fahrenheit.

**General:** No fever, chills, night sweats, weight gain, or weight loss.

**HEENT:** No double vision, eye pain, eye redness, decreased hearing, earache, ear ringing, nosebleeds, sore throat or hoarseness.

**Endocrine:** No cold intolerance, appetite changes or hair changes.

**Skin:** Clear, no rashes or lesions.

**Neuro:** No headaches, dizziness, vertigo or tremor.

**Respiratory:** No wheezing, coughing, shortness of breath or difficulty breathing.

**Cardiovascular:** No chest pain, murmurs, irregular heart rate or hypertension.

**GI:** No nausea, vomiting, diarrhea, constipation, jaundice or changes in bowel habits.

**GU:** No blood in urine, painful urination, loss of bladder control or urinary retention.

**Hematology:** No active bleeding, bruising, anemia or blood clotting disorders.

**Psychiatric:** No anxiety, change in sleep pattern, depression or suicidal thoughts.

**PHYSICAL EXAMINATION:** The patient's height is 5 feet 3 inches, weight is 160 pounds, and BMI is 28.3. The right shoulder reveals tenderness to palpation over AC joint. There is no heat, swelling, erythema, crepitus or deformity appreciated. Positive drop arm test. Negative cross-over test. Negative empty can test. Negative Yergason test. Negative deltoid atrophy. Positive O'Brien test. Positive impingement sign. Negative Lift-off test. Positive Hawkins test. Range of motion, as per goniometer, abduction 120/180 degrees, adduction 40/45 degrees, forward flexion 140/180 degrees, extension 45/60 degrees, internal rotation 65/90 degrees, and external rotation 70/90 degrees. Internal rotation to the sacrum. The patient has no motor or sensory deficit of the right upper extremity.

The right knee reveals tenderness along the medial joint line, lateral joint line, superior pole of patella, inferior pole of the patella. There is swelling and crepitus appreciated. There is no heat, erythema or deformity appreciated. Positive McMurray test. Negative Lachman test.

Positive patellofemoral grinding test. Negative anterior drawer. Negative posterior drawer. Range of motion reveals flexion 110/130 degrees and extension 0/5 degrees. Knee is stable with varus and valgus stress test. The patient has no motor or sensory deficit of the right lower extremity.

The right wrist reveals pain to palpation over the ulnar styloid and scaphoid. 4/5 grip strength. There is no swelling, erythema, and bruise noted. Negative Tinel sign. Negative Phalen test. Range of motion reveals flexion 70/80 degrees, extension 70/70 degrees, radial deviation 15/20 degrees, ulnar deviation 30/30 degrees.

**DIAGNOSTIC TESTING:** MRI of the right shoulder, done on 05/12/2022, shows tendinosis of supraspinatus and infraspinatus with bursal surface tear of the supraspinatus. Low-lying distal acromion with adjacent subacromial subdeltoid bursitis. MRI of the right knee, done on 05/12/2022, ACL findings, which may represent intrasubstance degeneration or interstitial tear. If there is persistent symptoms arthroscopy recommended for more definitive evaluation. Areas of intimate to high grade chondrosis medial patellar facet with suspected basal chondral delamination.

**ASSESSMENT:**

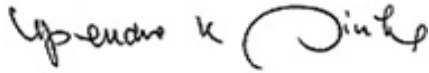
1. M24.811 Internal derangement, right shoulder.
2. M75.01 Adhesive capsulitis, right shoulder.
3. M75.81 Shoulder tendinitis, right shoulder.
4. S43.431A Labral tear, right shoulder.
5. M75.41 Impingement, right shoulder.
6. M65.811 Tenosynovitis, right shoulder.
7. M75.51 Bursitis, right shoulder.
8. M75.21 Bicipital tendinitis, right shoulder.
9. M25.511 Pain, right shoulder.
10. S49.91XA Injury, right shoulder.
11. M67.211 Hypertrophic synovitis, right shoulder.
12. M25.411 Joint effusion, right shoulder.
13. S83.241A Medial meniscus tear, right knee.
14. M23.91 Internal derangement, right knee.
15. S83.519A Anterior cruciate ligament tear, right knee.
16. S83.411 Medial collateral ligament sprain, right knee.
17. M94.261 Chondromalacia, right knee.
18. M22.2X1 Patellofemoral chondral injury, right knee.
19. M25.461 Joint effusion, right knee.
20. M12.569 Trauma arthropathy, right knee.
21. S80.911A Injury, right knee.
22. M25.561 Pain, right knee.
23. M65.161 Synovitis, right knee.
24. M24.10 Chondral lesion, right knee.
25. M24.661 Adhesions, right knee.
26. Torn TFC, 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 right shoulder, right knee and right wrist.
4. Continue anti-inflammatory and muscle relaxant medications p.r.n.
5. Continue physical therapy for right shoulder, right knee, and right wrist 3 days/week.
6. MRI ordered of right wrist to rule out ligament tear and/or synovial injury.
7. 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.



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

MS/AEI