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July 06, 2022

Office seen at: PR Medical PC 79-09B Northern Blvd Jackson Heights, NY 11372 Phone# (718) 507-1438

Re: Lopez, Juan DOB: 06/19/2002 DOA: 05/01/2022

INITIAL ORTHOPEDIC CONSULT EXAMINATION

CHIEF COMPLAINT: Left shoulder and right wrist pain.

HISTORY OF PRESENT ILLNESS: A 20-year-old right-hand dominant male involved in a motor vehicle accident on 05/01/2022. The patient was a motorcyclist. The vehicle was struck on the T-boned on drive side. The EMS did not arrive on the scene. The police were not called to the scene of the accident. The patient went by car to Elmhurst Hospital and was treated and released the same day. The patient presents today complaining of left shoulder and right wrist pain sustained in the motor vehicle accident. The patient was attending physical therapy for the last 2 months 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 taking pain medications p.r.n.

SOCIAL HISTORY: The patient is a nonsmoker. The patient does not drink alcohol. The patient does not use recreational drugs.

ADL CAPABILITIES: The patient states that he can walk for 1/2 block. He can stand for 5 minutes before he has to sit. He 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

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that he is unable to do the following activities: driving, lifting heavy objects, carrying heavy objects, reaching overhead, laundry, shopping, running errands, kneeling, squatting, negotiating stairs, jogging and exercising.

PRESENT COMPLAINTS: Left shoulder: Left shoulder pain is 3-4/10, described as intermittent, sharp, stabbing, dull, achy pain. The patient has clicking. The patient is able to reach overhead and able to reach behind the back. Worse with range of motion and improves with rest, medication, physical therapy, and ice.

Right wrist: Right wrist pain is 6/10, described as intermittent, dull, achy pain. Admits to weakness and numbness. 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 160 cm, weight is 120 pounds, and BMI is 23.4. The left shoulder reveals tenderness to palpation over supraspinatus tendon region and deltoid. There is crepitus appreciated. There is no heat, swelling, erythema or deformity appreciated. Negative 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 35/45 degrees, forward flexion 120/180 degrees, extension 50/60 degrees, internal rotation 65/90 degrees, and external rotation 65/90 degrees. Internal rotation to the sacrum. The patient has no motor or sensory deficit of the left upper extremity.

The right wrist reveals 4/5 grip strength. Negative Tinel sign. Negative Phalen test. Range of motion reveals flexion 70/80 degrees, extension 60/70 degrees, radial deviation 15/20 degrees, ulnar deviation 20/30 degrees.

DIAGNOSTIC TESTING: Pending.

ASSESSMENT:

1. S46.012A Partial rotator cuff tear, left shoulder.

- 2. M24.812 Internal derangement, left shoulder.
- 3. M75.02 Adhesive capsulitis, left shoulder.
- 4. M75.82 Shoulder tendinitis, left shoulder.
- 5. S43.432A Labral tear, left shoulder.
- 6. M75.42 Impingement, left shoulder.
- 7. M65.812 Tenosynovitis, left shoulder.
- 8. M75.52 Bursitis, left shoulder.
- 9. M25.512 Pain, left shoulder.
- 10. S49.92XA Injury, left shoulder.
- 11. S46.102A Biceps tendon tear, left shoulder.
- 12. M25.412 Joint effusion, left shoulder.
- 13. Internal derangement, 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. MRI ordered of right wrist to rule out ligament tear and/or synovial injury.
- 7. Follow up in 4 weeks.

<u>CAUSALITY</u>: 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

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