

# UK Sinha Physician, P.C.

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August 3, 2022

Office seen at:  
Tatay Ninong Physical Therapy  
1314 Coney Island Ave  
Brooklyn, NY 11230  
Phone# (718) 377-0100

Re: Shepelyak, Natalya  
DOB: 01/24/1965  
DOA: 05/19/2021

## FOLLOW-UP NOTE

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

**HISTORY OF PRESENT ILLNESS:** The patient presents today in followup with continued pain in the right knee and left knee.

**ADL CAPABILITIES:** The patient states that she can walk for 1/2 block. She can stand for 5 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: driving, lifting heavy objects, carrying heavy objects, reaching overhead, laundry, shopping, running errands, kneeling, squatting, negotiating stairs, jogging and exercising.

**PRESENT COMPLAINTS:** Right knee: Right knee pain is 6/10, described as intermittent, sharp, stabbing, dull, achy pain. The patient has stiffness and weakness. The patient has difficulty rising from a chair and has difficulty going up and down stairs. The patient also notes clicking, popping, buckling, and intermittent locking.

Left knee: Left knee pain is 5/10, described as intermittent, sharp, stabbing, dull, achy pain. The patient has stiffness and weakness. The patient has difficulty rising from a chair and has difficulty going up and down stairs. The patient also notes clicking, popping, buckling, and intermittent locking.

The patient had arthroscopy of right knee on 12/27/2021 and left knee on 05/09/2022.

**PHYSICAL EXAMINATION:** The right knee reveals tenderness along the superior pole of patella and inferior pole of the patella. There is no heat, swelling, erythema, crepitus or deformity appreciated. Positive McMurray test. Negative Lachman test. Negative patellofemoral grinding test. Negative anterior drawer. Negative posterior drawer. Range of motion reveals flexion 120/130 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 left knee reveals tenderness along the superior pole of patella and inferior pole of the patella. There is crepitus appreciated. There is no heat, swelling, erythema or deformity appreciated. Positive McMurray test. Negative Lachman test. Negative patellofemoral grinding test. Negative anterior drawer. Negative posterior drawer. Range of motion reveals flexion 120/130 degrees and extension -5/5 degrees. Knee is stable with varus and valgus stress test. The patient has no motor or sensory deficit of the left lower extremity.

**DIAGNOSTIC TESTING:** MRI of the right knee, done on 07/15/2021, shows findings suggesting a partial tear of the anterior cruciate ligament. Small joint effusion. Thinning of the cartilage in the medial and lateral compartments. Probably a hematoma in the prepatellar region and adjacent soft tissue area. Lateral tilting of the patella. MRI of the left knee, done on, 07/13/2022, shows findings suggesting a tear of the anterior horn of the medial meniscus. Thinning of the cartilage in the medial and patellofemoral compartments. Partial tear of the anterior portion of the medial collateral ligament. Tendinosis of the quadriceps and patellar tendons. Periarticular soft tissue edema. Dilated superficial veins along the medial aspect of the distal thigh and proximal lower leg.

**ASSESSMENT:**

1. M23.91 Internal derangement, right knee.
2. S83.519A Anterior cruciate ligament tear, right knee.
3. S83.511A Anterior cruciate ligament sprain, right knee.
4. S83.412A Medial collateral ligament sprain, left knee.
5. M94.261 Chondromalacia, right knee.
6. S83.31XA Tear articular cartilage, right knee.
7. M22.2X1 Patellofemoral chondral injury, right knee.
8. M12.569 Traumatic arthroscopy, right knee.
9. M25.461 Joint effusion, right knee.
10. S80.911A Injury, right knee.
11. M25.561 Pain, right knee.
12. M65.161 Synovitis, right knee.
13. M24.10 Chondral lesion, right knee.
14. M17.11 Osteoarthritis, right knee.
15. M24.661 Adhesions, right knee.
16. M23.92 Internal derangement, left knee.
17. S83.512A Anterior cruciate ligament sprain, left knee.
18. S83.412A Medial collateral ligament sprain, left knee.
19. M94.262 Chondromalacia, left knee.
20. S83.32XA Tear articular cartilage, left knee.

21. M22.2X2 Patellofemoral chondral injury, left knee.
22. M12.569 Traumatic arthropathy, left knee.
23. M25.462 Joint effusion, left knee.
24. S80.912A Injury, left knee.
25. M25.562 Pain, left knee.
26. M65.162 Synovitis, left knee.
27. M93.262 Osteochondral lesion, left knee.
28. M17.12 Osteoarthritis, left knee.
29. M24.662 Adhesions, left knee.

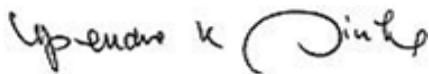
**PLAN:**

1. Cold compresses for right knee and left knee.
2. Continue anti-inflammatory and muscle relaxant medications p.r.n.
3. Continue physical therapy for right knee and left knee 3 days/week.
4. Follow up in 6 weeks.

**IMPAIRMENT RATING:** 100%. The patient is currently not working. Last date of work was 06/19/2021.

**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

UKS/AEI