

# UK Sinha Physician, P.C.

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November 11, 2022

Office seen at:  
S.P. Physical Therapy  
1320 Louis Nine Boulevard  
Bronx, NY 10459  
Phone # (347) 862-0003

Re: Gonzalez, Carolina  
DOB: 03/04/1989  
DOA: 09/15/2022

## INITIAL ORTHOPEDIC CONSULT EXAMINATION

**CHIEF COMPLAINT:** Right shoulder and right ankle pain.

**HISTORY OF PRESENT ILLNESS:** A 33-year-old right-hand dominant female involved in an accident on 09/15/2022. The patient tripped on metal fencing around the tree that was broken and she fell with the child in hand. The EMS arrived on the scene. The police were not called to the scene of the accident. The patient was transported via ambulance to St. Barnabas Hospital and was treated and released the same day. The patient presents today complaining of right shoulder and right ankle pain sustained in the 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:** Positive for thyroid. There is no previous history of trauma.

**PAST SURGICAL HISTORY:** Positive for C-section x3 in 2016, 2020 and 2021.

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

**MEDICATIONS:** The patient is taking Synthroid 150 mcg.

**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 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: lifting heavy objects, carrying heavy objects, reaching overhead, and running errands.

**PRESENT COMPLAINTS:** Right shoulder: Right shoulder pain is 8/10, described as constant sharp, stabbing, dull, achy pain. The patient has stiffness, weakness, popping, and clicking. The patient is able to reach overhead and behind the back, but unable to sleep at night due to pain. Worse with range of motion and improves with rest.

Right ankle: Right ankle pain is 7/10, described as constant dull, achy pain. The patient has difficulty standing, walking and climbing. Worse with range of motion and improves with rest.

**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 2 inches, weight is 148 pounds, and BMI is 27.1. The right shoulder reveals tenderness to palpation over supraspinatus tendon region, AC joint and proximal biceps tendon. There is no heat, swelling, erythema, or deformity appreciated. There is crepitus appreciated. Negative drop arm test. Positive cross-over test. Positive empty can test. Positive Yergason test. Negative deltoid atrophy. Positive O'Brien test. Positive impingement sign. Positive Lift-off test. Positive Hawkins test. Range of motion, as per goniometer, abduction 105/180 degrees, adduction 35/45 degrees, forward flexion 120/180 degrees, extension 40/60 degrees, internal rotation 40/90 degrees, and external rotation 55/90 degrees. Internal rotation to the sacrum. The patient has no motor or sensory deficit of the right upper extremity.

The right ankle reveals swelling noted over anterior and lateral malleolar aspect. Positive anterior drawer test. Positive inversion stress test. Tenderness to palpation noted in the lateral aspect. Range of motion is limited and painful. ROM: Dorsiflexion 10/20 degrees, plantar flexion 35/50 degrees, inversion 10/15 degrees, eversion 10/15 degrees.

**DIAGNOSTIC TESTING:** MRI of the right shoulder, done on 11/07/2022, shows bursal surface tear/fraying of the supraspinatus tendon with tendinopathy. Tendinopathy of the infraspinatus tendon. Tendinopathy of the subscapularis tendon. Biceps tenosynovitis. Tear of the anterior labrum which is not well visualized. Small joint effusion. Lateral downsloping

acromion which may cause impingement. MRI of the right ankle, done on 11/07/2022, shows interstitial tear and sprain of the ATFL. Small joint effusion.

**ASSESSMENT:**

1. S46.011A Partial rotator cuff tear, right shoulder.
2. M24.811 Internal derangement, 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. M75.21 Bicipital tendinitis, right shoulder.
8. M25.511 Pain, right shoulder.
9. S49.91XA Injury, right shoulder.
10. M25.411 Joint effusion, right shoulder.
11. Anterior talofibular ligament tear and sprain, right ankle.
12. Joint effusion, right ankle.
13. Pain, right ankle.
14. Injury, right ankle.

**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 and right ankle.
4. Continue anti-inflammatory and muscle relaxant medications p.r.n.
5. Continue physical therapy for right shoulder and right ankle 3 days/week.
6. Recommend steroid injections with pain management for right shoulder and right ankle. The patient refuses due to side effects.
7. Discussed right shoulder and right ankle arthroscopies versus conservative management with the patient. The patient states that due to continual pain and lack of relief with physical therapy and the inability to perform day-to-day activities due to pain, the patient would like to proceed with surgery.
8. It is medically necessary to perform the suggested surgery to properly diagnose the patient's condition and to objectively verify presence and severity of internal derangement and other right shoulder and right ankle pathologies in quantitative and qualitative terms and achieve better prognosis. This surgery is crucial to provide most specific and maximally effective treatment to this patient.
9. Discussed the length of the arthroscopy, the postoperative instructions, and the option of continuing with conservative management alternatives to surgery, including no surgery.
10. All the benefits and risks of the right shoulder and right ankle arthroscopies have been discussed with the patient. The risks include, but not limited to bleeding, infection, pain, stiffness, muscle injury, nerve injury, DVT, and recurrence.
11. All the questions in regard to the procedure were answered.
12. The patient verbally consents for the arthroscopy of right shoulder and the patient will be scheduled for right shoulder surgery. On the day of the surgery, before the procedure, the

surgeon will explain all related questions of the procedure. The patient will sign a written consent and be witnessed by the surgeon.

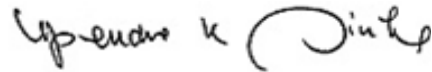
13. The patient will follow up 1-2 weeks postop or in 2 months if surgery has not been performed yet.

**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.



Mellita Shakhmurov, PA-C  
MS/AEI



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Board Certified Orthopedic Surgeon