# UK Sinha Physician, P.C.

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July 18, 2022

Office seen at: Baxter Medical Care, PC 8106 Baxter Ave # Mc2 Elmhurst, NY 11373 Phone# (718) 639-1110

Re: Salas, Saul DOB: 01/01/1972 DOA: 05/21/2022

## INITIAL ORTHOPEDIC CONSULT EXAMINATION

**CHIEF COMPLAINT:** Right knee, left knee, right wrist, left wrist, neck, and low-back pain.

HISTORY OF PRESENT ILLNESS: A 50-year-old right-hand dominant male involved in a work-related accident on 05/21/2022. While at work, the patient was 3 feet off the ground painting and the patient fell off. The EMS arrived on the scene. The police were called to the scene of the accident. The patient was transported via ambulance to Greenwich Hospital and was treated and released the same day. The patient presents today complaining of right knee, left knee, right wrist, left wrist, neck, and low-back pain sustained in the work-related accident. The patient was attending physical therapy for 3 times per week with little relief.

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

**PAST MEDICAL HISTORY:** Noncontributory. There is no previous history of trauma.

**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 he can walk for 2 blocks. He can stand for 1/2 hour before he has to sit. He can sit for 30 minutes before needing to change positions secondary to pain. As a direct result of the injuries sustained in this accident, the patient states that he is

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unable to do the following activities: garden, play sports, driving, lifting heavy objects, childcare, carrying heavy objects, shopping, running errands, kneeling, squatting, negotiating stairs, 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 9/10, 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.

Right wrist: Right wrist pain is 8/10, described as intermittent, dull, achy pain. Admits to weakness, numbness, tingling. The patient has pain with lifting, carrying, and driving.

Left wrist: Left wrist pain is 6/10, described as intermittent, dull, achy pain. Admits to weakness, numbness, tingling. The patient has pain with lifting, carrying, and driving.

**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 6 inches, weight is 177 pounds, and BMI is 28.6. The right knee reveals tenderness along the medial joint line, 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. Positive patellofemoral grinding test. Negative anterior drawer. Negative posterior drawer. Range of motion reveals flexion 110/130 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 right lower extremity.

The left knee reveals tenderness along the medial joint line, 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. Positive

patellofemoral grinding test. Negative anterior drawer. Negative posterior drawer. Range of motion reveals flexion 100/130 degrees and extension -10/5 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:** Pending MRI of right knee, left knee, and right wrist. MRI of the left wrist, done on 07/12/2022, shows normal findings.

#### **ASSESSMENT:**

- 1. M23.91 Internal derangement, right knee.
- 2. S83.511A Anterior cruciate ligament sprain, right knee.
- 3. S83.411 Medial collateral ligament sprain, right knee.
- 4. M94.261 Chondromalacia, right knee.
- 5. S83.31XA Tear articular cartilage, right knee.
- 6. M22.2X1 Patellofemoral chondral injury, right knee.
- 7. M25.461 Joint effusion, right knee.
- 8. M12.569 Traumatic arthropathy, right knee.
- 9. S80.911A Injury, right knee.
- 10. M25.561 Pain, right knee.
- 11. M65.161 Synovitis, right knee.
- 12. M24.10 Chondral lesion, right knee.
- 13. M24.661 Adhesions, right knee
- 14. M23.92 Internal derangement, left knee.
- 15. S83.512A Anterior cruciate ligament sprain, left knee.
- 16. S83.412A Medial collateral ligament sprain, left knee.
- 17. M94.262 Chondromalacia, left knee.
- 18. S83.32XA Tear articular cartilage, left knee.
- 19. M22.2X2 Patellofemoral chondral injury, left knee.
- 20. M25.462 Joint effusion, left knee.
- 21. M12.569 Traumatic arthropathy, left knee.
- 22. S80.912A Injury, left knee.
- 23. M25.562 Pain, left knee.
- 24. M65.162 Synovitis, left knee.
- 25. M24.10 Chondral lesion, left knee.
- 26. M24.662 Adhesions, left knee.
- 27. Sprain, right wrist.
- 28. Sprain, left 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 knee, left knee, right wrist, and left wrist.
- 4. Continue anti-inflammatory and muscle relaxant medications p.r.n.
- 5. Continue physical therapy for right knee, left knee, right wrist, and left wrist 3 days/week.
- 6. The patient is awaiting MRI of right knee, left knee, and right wrist.
- 7. Follow up in 4 weeks.

# **IMPAIRMENT RATING**: 50%.

<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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