UK Sinha Physician, P.C.

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August 24, 2022

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

Re: Tavarez, Rodolfo

DOB: 10/22/1973 DOA: 08/20/2021

FOLLOW-UP NOTE

CHIEF COMPLAINT: Follow up of right shoulder, right knee, and right wrist pain.

HISTORY OF PRESENT ILLNESS: The patient presents today in followup with continued pain in the right shoulder, right knee, and right wrist.

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

PRESENT COMPLAINTS: Right shoulder: Right shoulder pain is 5/10, described as intermittent, sharp, stabbing, dull, achy pain. The patient has weakness. The patient is able to reach overhead and able to reach behind the back. The patient had a right shoulder arthroscopy in February 2022.

Right knee: Right knee pain is 5/10, described as intermittent, sharp, stabbing, dull, achy pain. The patient has weakness. The patient has no difficulty rising from a chair and has no difficulty going up and down stairs. The patient also notes buckling. The patient had a right knee arthroscopy in January 2022.

Right wrist: Right wrist pain is 6/10, described as intermittent, dull, achy pain. The patient has pain with lifting, carrying, and driving. Worse with range of motion and improves with rest, medication, physical therapy, and ice.

PHYSICAL EXAMINATION: The right shoulder reveals tenderness to palpation over supraspinatus tendon region. There is crepitus appreciated. There is no heat, swelling, erythema, crepitus or deformity appreciated. Negative drop arm test. Negative cross-over test. Negative empty can test. Negative Yergason test. Negative deltoid atrophy. Negative O'Brien test. Negative impingement sign. Negative Lift-off test. Negative Hawkins test. Range of motion, as per goniometer, abduction 160/180 degrees, adduction 40/45 degrees, forward flexion 170/180 degrees, extension 50/60 degrees, internal rotation 80/90 degrees, and external rotation 80/90 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. There is swelling and crepitus appreciated. There is no heat, erythema or deformity appreciated. Negative 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 right wrist reveals pain to palpation over the distal radius. Negative Tinel sign. Negative Phalen test. Range of motion reveals flexion 75/80 degrees, extension 65/70 degrees, radial deviation 15/20 degrees, ulnar deviation 20/30 degrees.

DIAGNOSTIC TESTING: MRI of the right knee, done on 10/11/2021, shows a prominent interstitial tear of the ACL is noted. There is no laxity. A horizontal tear is seen exiting inferiorly noted at the mid and posterior body of the medial meniscus. There is a contusion over the patellar tendon. A small joint effusion is seen without evidence of a loose body. There is a grade I injury of the medial collateral ligament

ASSESSMENT:

- 1. M24.811 Internal derangement, right shoulder.
- 2. M75.41 Impingement, right shoulder.
- 3. M25.511 Pain, right shoulder.
- 4. S49.91XA Injury, right shoulder.
- 5. M23.91 Internal derangement, right knee.
- 6. M12.569 Traumatic arthropathy, right knee.
- 7. S80.911A Injury, right knee.
- 8. M25.561 Pain, right knee.
- 9. Sprain, 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. Follow up in 4 weeks.

IMPAIRMENT RATING: 100%. The patient is currently not working.

<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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