March 15, 2024

**RE:**     Ms. Apar Sakti   
**DOB:**  01/01/2000   
**DOA:**   03/13/2024   
**Location:**   Bayside-Ortho

**ORTHOPEDIC RE-EVALUATION**  
  
**CHIEF COMPLAINT:**  Right shoulder and left shoulder pain..

**HISTORY OF PRESENT ILLNESS:** ~A \_\_\_\_\_-year-old \_\_\_\_\_right/left -hand dominant \_\_\_\_\_male/female involved in a motor vehicle/work related accident on \_\_\_\_\_(DOA). The patient was a \_\_\_\_\_driver/passenger/pedestrian/bicyclist/motorcyclist/bus passenger and was wearing a seatbelt. The vehicle was struck on the \_\_\_\_\_ side. The airbags \_\_\_\_deployed/did not deploy. The EMS \_\_\_\_arrived/did not arrive on the scene. The police \_\_\_\_\_were/were not called to the scene of the accident. The patient was transported via ambulance/car\_\_\_ to \_\_\_\_\_ Hospital and was treated and released the same day. \_\_\_\_\_The patient did not go to any hospital that same day. The patient presents today complaining of \_\_\_\_\_ (body part) pain sustained in the \_\_\_\_\_motor vehicle/work related accident. The patient was attending physical therapy for the last \_\_\_\_\_ weeks/months with good/no/little relief.

Test

**PRESENT COMPLAINTS:** Right shoulder: Right shoulder pain is \_\_\_\_\_/10, described as \_\_\_\_\_constant/intermittent, sharp, stabbing, dull, achy pain. The patient has stiffness, weakness, popping, and clicking. The patient has pain with lifting, carrying and driving. The patient is unable to reach overhead or behind the back and unable to sleep at night due to pain. Worse with range of motion and improves with rest, medication, physical therapy, and ice.

Left shoulder: Left shoulder pain is \_\_\_\_\_/10, described as \_\_\_\_\_constant/intermittent, sharp, stabbing, dull, achy pain. The patient has pain with lifting, carrying and driving. The patient has stiffness, weakness, popping, and clicking. The patient is unable to reach overhead or behind the back and unable to sleep at night due to pain. Worse with range of motion and improves with rest, medication, physical therapy, and ice.

**IMPAIRMENT RATING:**

**PHYSICAL EXAMINATION:** The right shoulder reveals tenderness to palpation/swelling over \_\_\_\_\_supraspinatus tendon region, AC joint, trapezius, proximal biceps tendon, coracoid, deltoid, scapula spine. There is no swelling, heat, erythema, crepitus or deformity appreciated. / There is crepitus appreciated. Positive/Negative drop arm test. Positive/Negative cross-over test. Positive/Negative empty can test. Positive/Negative Yergason test. Positive/Negative deltoid atrophy. Positive/Negative Oâ€™Brien test. Positive/Negative impingement sign. Positive/Negative Lift-off test. Positive/Negative Hawkins test. AROM as per goniometer: Abduction \_\_\_\_\_/180 degrees, adduction \_\_\_\_\_/45 degrees, forward flexion \_\_\_\_\_/180 degrees, extension \_\_\_\_\_/60 degrees, internal rotation \_\_\_\_\_/90 degrees, and external rotation \_\_\_\_\_/90 degrees. Internal rotation to the \_\_\_\_\_sacrum/mid back. The patient has no motor or sensory deficit of the right upper extremity.

The left shoulder reveals tenderness to palpation over \_\_\_\_\_supraspinatus tendon region, AC joint, trapezius, proximal biceps tendon, coracoid, deltoid, scapula spine. There is no swelling, heat, erythema, crepitus or deformity appreciated. / There is crepitus appreciated. Positive/Negative drop arm test. Positive/Negative cross-over test. Positive/Negative empty can test. Positive/Negative Yergason test. Positive/Negative deltoid atrophy. Positive/Negative Oâ€™Brien test. Positive/Negative impingement sign. Positive/Negative Lift-off test. Positive/Negative Hawkins test. AROM as per goniometer: Abduction \_\_\_\_\_/180 degrees, adduction \_\_\_\_\_/45 degrees, forward flexion \_\_\_\_\_/180 degrees, extension \_\_\_\_\_/60 degrees, internal rotation \_\_\_\_\_/90 degrees, and external rotation \_\_\_\_\_/90 degrees. Internal rotation to the \_\_\_\_\_sacrum/mid back. The patient has no motor or sensory deficit of the left upper extremity.

**DIAGNOSTIC STUDIES:** None Reviewed

**FINAL DIAGNOSES:**

* Impingement, right shoulder. - M75.41
* Internal derangement, right shoulder - M24.811
* Pain, right shoulder - M25.511
* Injury, right shoulder - S49.91XA
* Injury, right shoulder - S49.91XA
* Injury, right shoulder - S49.91XA
* Internal derangement, left shoulder - M24.812
* Pain, left shoulder - M25.512

**PLAN:**

* Imaging studies and clinical examinations were reviewed with the patient.
* All treatment options discussed with the patient.

**CAUSALITY:**It is within a certain degree of medical certainty, that the history presented by Ms. Apar Sakti, the objective physical findings as well as the diagnosis rendered right shoulder,left shoulder is causally related to the injury the patient incurred on the 03/13/2024.  These current symptoms were nonexistent prior to the accident. Findings were discussed with the patient**.**