ANJANI SINHA MEDICAL P.C.

ORTHOPEDIC SURGEON

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ANJANI SINHA, M.D., M.S. (Ortho)

September 19, 2019 DOA: 06/29/2019

Aleksandr Kopach, PA-C 82-25 Queens Boulevard, Suite 1A Elmhurst, NY 11373

Re: Luisa Maria Arreaga

DOB: 08/25/1949

Dear Mr. Kopach:

HISTORY:

The patient is a 70-year-old woman, who was a restrained passenger of the motor vehicle that was involved in an accident. She sustained multiple skeletal injuries including injury to her right knee on 06/29/2019. On an emergent basis, she was taken to Lenox Hill Hospital where she was treated and released. Since then, she has been having pain in the right knee intermittently and she is here for orthopedic evaluation.

PRESENT COMPLAINTS:

The patient complains of pain in the right knee. She states that when she walks for a long period of time, her knee feels tired and stiff.

PAST MEDICAL HISTORY:

Positive for high blood pressure, thyroid disorder and atrial fibrillation.

PAST SURGICAL HISTORY:

Positive for hernia repair, C-section, catheterization and eye implants.

CURRENT MEDICATIONS:

Anti-hypertensive medicine, thyroid medicine, and atenolol.

ALLERGIES:

Pollens.

PHYSICAL EXAMINATION:

Her height is 5 feet. She weighs 149 pounds. Examination of the head, neck, chest and abdomen is benign. She is an alert, oriented, and cooperative woman.

RIGHT KNEE: Effusion 1+. There is medial and lateral joint line tenderness. Patellofemoral grinding test and McMurray test are positive. Lachman is negative. Range of motion is from 0 to 130 degrees of flexion (normal range of motion is from 0 to 135 degrees of flexion).

<u>MRI</u> of the right knee is positive for medial collateral ligament sprain and traumatic joint effusion.

If the given history is correct, the injury to the right knee is related to the accident on 06/29/2019.

FINAL DIAGNOSES:

- 1. Traumatic medial meniscus tear, right knee.
- 2. Traumatic effusion, right knee.
- 3. Traumatic medial and lateral collateral ligament sprain, right knee.

TREATMENT/PLAN:

I have advised physical therapy for the right knee at least twice a week for another 4 weeks and she will have a follow up in 4 weeks. If she does not improve, I will then consider surgical intervention. With her extensive medical history and negative MRI, the course of action at this time will be conservative nonoperative management.

I, Anjani Sinha, M.D., being duly licensed to practice medicine in the state of New York hereby affirm under the penalty of perjury that the statements contained herein are true and accurate to the best of my knowledge.

Sincerely yours,

ANJANI SINHA, M.D., M.S.