

Transcription

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Transcription Text

I had the pleasure seeing Mr. Conserva. He is 30 years old and comes in for evaluation of his right knee. The patient has a right knee deformity secondary to an accident in 1989, when he was 8 years old. He was hit by a truck and dragged. Subsequently, he had multiple reconstructions for the mangled deformity including intramedullary nail, done by Dr. Tolo at Children's Hospital Los Angeles, along with skin grafting and soft tissue flaps. The patient subsequently went on to have Ilizarov placement and medial femoral epiphysiodesis in 1991, by Dr. Reynolds, down in Children's Hospital Los Angeles. He also had a contralateral side epiphysiodesis, too. He had a right posterior tib tendon transfer for a dropfoot in 1997. He really reports no pain in his right leg. He is very active and still engages in many outdoor activities including weight training, snowboard, tennis, and running without any problems. He currently wears a knee/ankle/foot orthosis, when he walks with his activities. Without the brace, he does not complain of any locking or instability.

PAST MEDICAL HISTORY: As above.

MEDICATIONS: Flonase and Claritin.

SOCIAL HISTORY: Denies tobacco. Social alcohol use. The patient is currently unemployed, but was self-employed owning his own company in the past.

X-RAYS: On his right lower extremity, there is deficiency of his lateral femoral condyle, with an over-grown medial femoral condyle, and there is a deficiency in his lateral tibial plateau. Right lower extremity is in valgus. Patella subluxed.

PHYSICAL EXAMINATION: No apparent distress, healthy, well appearing. Right lower extremity difficult to palpate dorsalis pedis, posterior tib. The foot is warm. Less than 5 degrees of dorsiflexion of his foot. Plantar flexion. Normal strength EHL. He is able to dorsiflex his great toe. Range of motion of his knee is from 15-80 degrees. With flexion of the knee, the lower leg externally rotates and swings out into valgus. Valgus stress is 3+ at 0 and 30 degrees, with a soft end point. Rigid with varus stress.

ASSESSMENT AND PLAN: Mr. Conserva is 30 years old, with a deformed right lower extremity without any pain and has no functional limitations. We have discussed at length the issues here. Given the patient's high functional activity and absence of pain, I do not recommend any surgical measures at this point. We likely cannot what the patient has now. We have discussed the unpredictability of his future courses, as this is a unique case. I have him the name of our orthotist, to see if he can be evaluated for a new KAFO, that might be more comfortable. He is, otherwise, discharged from our clinic and can follow up as needed.

David H Le, MD

Stuart B Goodman, MD PhD

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