

PATIENT MEDICAL RECORD — SUMMARY CHART

Patient Demographics

Field	Value
Name	David Anthony Chen
DOB	July 22, 1980 (Age 45)
Sex	Male
MRN	PAC-2025-14403
Insurance	Anthem Blue Cross Blue Shield — ANT-XKR-773204918
PCP	Dr. Robert Nguyen, MD — Coastal Family Medicine
Surgeon	Dr. Sarah Okonkwo, MD — Pacific Orthopedic Surgery Center

Chief Complaint

"My right knee locked up while I was playing basketball 6 weeks ago. It swells up every day and I can't fully straighten it."

History of Present Illness (HPI)

Mr. Chen is a 45-year-old male presenting with a **6-week history of right knee pain, swelling, and mechanical locking** following an acute twisting injury during recreational basketball on February 25, 2026. He describes an immediate "pop" at the time of injury followed by rapid swelling within 2 hours. Since the injury, he reports:

- Persistent medial joint line pain rated **6/10** at rest, **8/10** with activity
- Daily effusion requiring periodic aspiration
- Mechanical locking episodes 2-3 times per week (unable to fully extend knee)
- Giving-way sensation with pivoting movements
- Unable to return to work as a high school PE teacher since March 15, 2026

Prior Treatment History

Date	Treatment	Provider	Outcome
Feb 25, 2026	Urgent care visit — knee immobilizer, crutches, ice	CityMD Urgent Care	Initial stabilization
Mar 3, 2026	Orthopedic consultation	Dr. Okonkwo	Clinical diagnosis: medial meniscus tear. Ordered MRI.

Mar 7, 2026	MRI right knee (CPT 73721)	Pacific Imaging	Findings: Complex tear of the medial meniscus, posterior horn, extending to body. Moderate joint effusion. ACL intact. No loose bodies.
Mar 10, 2026	Follow-up — MRI review	Dr. Okonkwo	Recommended arthroscopic partial meniscectomy + chondroplasty. Discussed conservative vs. surgical options. Patient elected surgery.
Mar 10 – Apr 1	Conservative trial: PT 2x/week, Meloxicam, knee brace	ProMotion PT	4 weeks of PT with no improvement. Locking episodes persist.
Apr 2, 2026	Pre-operative visit	Dr. Okonkwo	Cleared for surgery. Note: Office staff responsible for obtaining prior authorization.
Apr 8, 2026	Arthroscopic surgery performed	Dr. Okonkwo	Partial medial meniscectomy (CPT 29881) + chondroplasty (CPT 29877). Uncomplicated.

Physical Examination (March 3, 2026)

Vitals: BP 128/78, HR 72, BMI 26.1

Right Knee:

- Moderate effusion with ballottable patella
- Tenderness along medial joint line
- Positive McMurray test (click + pain with valgus stress and external rotation)
- Positive Apley compression test
- Lachman test: Negative (ACL intact)
- Varus/valgus stress: Stable (collaterals intact)
- Active range of motion: 10° – 120° (unable to achieve full extension due to mechanical block)
- Passive range of motion: Meets mechanical block at 8° extension

Left Knee: Normal, full ROM, no effusion, ligaments stable

Gait: Antalgic, favoring right lower extremity

Operative Report Summary (April 8, 2026)

Procedure: Right knee arthroscopy with partial medial meniscectomy and chondroplasty **Surgeon:** Dr. Sarah Okonkwo, MD **Anesthesia:** General **Duration:** 48 minutes **Findings:**

- Complex degenerative tear of medial meniscus posterior horn with displaced flap extending into intercondylar notch (causing mechanical locking)
- Grade III chondral damage on medial femoral condyle (2cm × 1.5cm area)
- ACL and PCL intact, lateral meniscus intact, no loose bodies

Procedure performed:

- Partial resection of torn meniscal flap, preserving stable meniscal rim

- Chondroplasty of medial femoral condyle lesion
- Copious irrigation

Estimated blood loss: Minimal **Complications:** None **Disposition:** Outpatient, discharged same day

Medications

Medication	Dose	Frequency	Start Date
Meloxicam	15 mg	Daily	Mar 3, 2026
Hydrocodone/APAP	5/325 mg	Q6H PRN (post-op, 5 days)	Apr 8, 2026

Relevant Past Medical History

- No prior knee surgery
- Mild hyperlipidemia (diet-controlled)
- No history of DVT/PE
- No bleeding disorders
- No allergies to anesthesia

Social History

- Occupation: High school physical education teacher
- Recreational basketball player
- Non-smoker
- Social alcohol use (2-3 drinks/week)
- Lives with wife and 2 children

Provider Notes

Dr. Okonkwo, April 2, 2026 (Pre-operative visit):

*Patient has completed 4 weeks of conservative management including physical therapy, NSAIDs, and activity modification with no improvement in mechanical symptoms. Locking episodes continue 2-3x/week and are the primary functional limitation. MRI confirms complex medial meniscus tear with displaced flap — this is the cause of the mechanical locking and will not resolve without surgical intervention. Arthroscopic partial meniscectomy with chondroplasty is the standard of care. Discussed risks, benefits, alternatives. Patient consents to surgery. **Office to obtain prior authorization from Anthem BCBS per patient's plan requirements.***

Office Manager Note, April 10, 2026:

Authorization request was inadvertently not submitted prior to surgery date. This was an administrative oversight by our scheduling coordinator. A retroactive authorization request will be filed. The patient was not informed that authorization had not been obtained prior to the procedure.