

November 7, 1956

City of Dallas
City Hall
Dallas, Texas

Attn: Mr. Roach

Re: J. D. Tippett

Dear Mr. Roach:

The following is a copy of my record on the above named patient first seen by me in the office on 11/6/56.

Family history is essentially negative. The patient states that he had an abdominal distress about 2½ years ago and was treated at the Veterans Hospital without a definite diagnosis being established. He recovered and has had no difficulty since.

The patient states that about April, 1956 while on duty for the City of Dallas he and a fellow policeman were attempting to arrest a mentally ill patient when the patient stabbed him in the right knee with an ice pick. The patient reported to Parkland Hospital where emergency care was carried out but no x-ray made. The following day there was considerable swelling and the patient then returned to Parkland where further care was administered. Ace bandage was then applied and the patient states that after about three days the swelling seemed to subside. He limped for about two weeks after this, but then seemed to be doing quite well until about six weeks ago when he noticed that he developed pain in his right knee again. He noticed pain mainly after sitting for any length of time. The pain would seem to be in the region of the previous wound. His leg has felt weak since the injury but he thought that this would continue to improve. However, it has not and seems to be increasing in the amount of weakness over the past six weeks. He is referred to the office this date by the City of Dallas for evaluation.

Physical examination is essentially negative. The penetrating wound over the lateral aspect of the right knee is well healed. No loose bodies are felt and there does not appear to be any swelling of the knee this date. There is pain, however, on compression of the patella against the femur. AP and lateral views of the right knee reveals a metallic foreign body penetrating through the patella in the superior pole and approximately 1/4 to 3/8 inch of the sharp point of the metal is protruding into the articular surface between the patella and the femur. There does not appear to be any severe reaction about the metallic body this date. Diagnosis is (1) metallic foreign body, articular surface, patella and femur, right and (2) synovitis, knee joint, right, traumatic and secondary to #1.