Physical Therapy Sample Reports © 2009

Includes:

- Progress/ Treatment Note
- Plan of Care from Initial Evaluation
- Initial Evaluation/ Examination (full-length compliant)
- Ten (10) Visit Progress Report
- Discharge Summary
- Physician’s Communication
- Missed Visit Report
- Worker’s Comp
- 700 Form
Progress / Treatment Note

Physical Therapy

Date: 01/17/08
DOB: 08/02/61
Treating Clinician: Thomas Hook, PT

Onset Date | Code | Description
---|---|---
Primary Diagnosis: 12/25/06 | 844.2 | Sprain Of Cruciate Ligament Of Knee
Other Diagnosis: 07/11/06 | 781.2 | Abnormality Of Gait

Time In: 10:00 AM | Time Out: 11:00 AM
Total Minutes: 55 | Total Timed Minutes: 55 | Total Untimed Minutes: 0
Total Units: 4 | Total Timed Units: 4 | Total Untimed Units: 0

Progressive Exercises:

<table>
<thead>
<tr>
<th>Exercise Description</th>
<th>Quantity</th>
<th>Unit</th>
<th>Sets</th>
<th>Reps</th>
</tr>
</thead>
<tbody>
<tr>
<td>Knee - general strengthening and range of motion - right</td>
<td>3</td>
<td>lbs</td>
<td>3</td>
<td>15</td>
</tr>
<tr>
<td>Knee - Gluteal sets with heel elevated - right</td>
<td>10</td>
<td>secs</td>
<td>2</td>
<td>10</td>
</tr>
<tr>
<td>Knee - hamstring sets - right</td>
<td>10</td>
<td>secs</td>
<td>2</td>
<td>10</td>
</tr>
<tr>
<td>Knee - knee extension - seated - right</td>
<td>4</td>
<td>lbs</td>
<td>3</td>
<td>15</td>
</tr>
</tbody>
</table>

Impairment Observations:

The right knee is swollen and painful with palpation, movement and weight bearing > 25% on the right lower extremity. Edema now at 46cm, 48cm, and 38cm. Ultrasound to right knee 1.5 watts/cm2. BP 120/80.

Characteristics and Analysis:

Mr. Flinstone is improving, but continues to have difficulty in ambulation and requires moderate assistance with crutches on uneven terrain to maintain 25% weight bearing status for the right lower extremity. Due to this limitation, he is not able to propel his car or climb into the crane for work at the quarry.

Specific Joints
(Note: Blank indicates Strength / Range of Motion are within functional limits or not tested)

<table>
<thead>
<tr>
<th>Joint</th>
<th>Current Level</th>
<th>Goal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Knee</td>
<td>Strength</td>
<td>Active ROM</td>
</tr>
<tr>
<td></td>
<td>Right</td>
<td>Left</td>
</tr>
<tr>
<td>Flexion</td>
<td>3/5</td>
<td>5/5</td>
</tr>
<tr>
<td>Extension</td>
<td>2+/5</td>
<td>5/5</td>
</tr>
<tr>
<td>Knee</td>
<td>Strength</td>
<td>Active ROM</td>
</tr>
<tr>
<td></td>
<td>Right</td>
<td>Left</td>
</tr>
<tr>
<td>Flexion</td>
<td>5/5</td>
<td>5/5</td>
</tr>
<tr>
<td>Extension</td>
<td>5/5</td>
<td>5/5</td>
</tr>
</tbody>
</table>

Current Plan: Three times weekly

Patient's response to PT Interventions: Good
Patient's progress toward established goals: Good

Thomas Hook, PT 01/16/08 3:50:05 PM
State License #: 310
Plan of Care (Initial Evaluation)  

**Patient Name:** Flintstone, Frederick  
**Medical Record #:** 123  
**Account #:** 1234567892  
**Provider:** Lakeside Rehabilitation  
**Provider #:** 25489631  
**Medicare #:** 111-22-2333A  
**Certification From:** 01/15/07  
**Certification To:** 02/15/07  
**Service From:** 03/15/07  
**Service To:** 12/26/06  
**Hospitalized From:** 12/26/06  
**Hospitalized To:** 12/28/06  

**Primary Diagnosis:**  
Code: 844.2  
Description: Sprain Of Cruciate Ligament Of Knee  
Onset Date: 12/25/06  

**Other Diagnosis:**  
Code: 781.2  
Description: Abnormality Of Gait  
Onset Date: 07/11/07  

**Preferred Practice Pattern:** Musculoskeletal E: Impaired joint mobility, motor function, muscle performance, ROM associated w/localized inflammation  

**Systems Review, History:** This 45 y. o. male presents with a diagnosis of right anterior cruciate ligament sprain with an onset date of 12/25/06 when he fell down the porch steps while carrying packages. He is seen initially on this date for evaluation and treatment by this therapist due to persistent pain and limited ambulation. Previous medical history of insignificance. The patient is motivated to participate in treatment to achieve his functional goal of propelling his car and returning to work in rock quarry.

**Current Level**  

<table>
<thead>
<tr>
<th>Level of Ambulation - Even:</th>
<th>Knee Passive ROM</th>
<th>Level of Ambulation - Even:</th>
<th>Knee Active ROM</th>
</tr>
</thead>
<tbody>
<tr>
<td>Level of Ambulation - Even:</td>
<td>Crutches - Supervision - Standby assistance 100 Feet</td>
<td>Right</td>
<td>71° 145°</td>
</tr>
<tr>
<td>Level of Ambulation - Uneven:</td>
<td>Crutches - Extensive - Moderate assistance 35 Feet</td>
<td>Left</td>
<td>85° 145°</td>
</tr>
<tr>
<td>Stair Climbing:</td>
<td>Crutches - Extensive - Moderate assistance 4 Steps</td>
<td>Right</td>
<td>0°</td>
</tr>
<tr>
<td>Tolerance to IADLs:</td>
<td>Moderate - Severe pain and limitation during and/or after a specific IADL affecting performance</td>
<td>Left</td>
<td>0°</td>
</tr>
<tr>
<td>Tolerance to Work Activities:</td>
<td>Moderate - Severe pain and limitation in a specific work activity affecting performance</td>
<td>Right</td>
<td>-15°</td>
</tr>
<tr>
<td>Physical - Dynamic Balance:</td>
<td>1/5 Berg Balance Scale -Scored 0-12 High risk of falls</td>
<td>Left</td>
<td>-20°</td>
</tr>
<tr>
<td>Pain: Joint Pain - Knee - Right; At Rest 5/10; With Activity 8/10; Dull; Cramping; Radiating</td>
<td>Goals for Pain: Decrease pain at rest and during weight bearing activities to 0/10.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Impairment Goals**  
Joint inflammation, or restriction & pain are reduced by 50% in 2 weeks  
Pain is decreased by 50% in 2 weeks

**Goals**  
Ambulation/stair climbing are improved to prior level of function  
Work performance in related activities is improved to prior level of function

**Functional characteristics and analysis:** Mr. Flintstone is having difficulty in ambulation and requires moderate assistance with crutches on uneven terrain to maintain 25% weight bearing status for the right lower extremity. Due to this limitation, he is not able to propel his car, or climb into the crane for work at the quarry.

**Knee Comments:** Joint play is moderate-severely limited in posterior and forward movements of tibia on femur, and medial and lateral translation of tibia on femur.
Impairment Observations

The right knee is swollen and painful with palpation, movement and weight bearing >25% on the right lower extremity. Strength and range of motion in right knee is impaired and will be assessed with each treatment.

Interventions (CPT Code)

- Physical Therapy Evaluation 97001
- Gait Training &/or Stair Climbing - Therapeutic Procedure - 1+ Areas 97116
- Therapeutic Exercises - Therapeutic Procedure - 1+ Areas 97110
- Ultrasound - Modality to 1+ Areas - Each 15 Min 97035

Frequency of PT: Three times weekly
Duration of PT: 6 weeks

I certify the need for these services furnished under this plan of treatment while under my care.

Thomas Hook, PT
State License #: 310
Date: 01/15/07
Initial Evaluation / Examination

Patient Name: Flintstone, Frederick
Medical Record #: 123
Account #: 1234567892
Provider: Lakeside Rehabilitation
Provider #: 25489631

Date: 01/15/07
DOB: 08/02/61

Physician: James L. Smith, MD
Physician #: 123

Patient Information
Address: 123 Opry Way
Nashville, Tennessee  37203
Occupation: Engineer
Gender: Male
Contact Person: Wilma Flintstone

# of Approved Visits: 12

Medicare #: 111-22-2333A
Medicaid #:

Rehabilitation Information / History

Onset Date Code Description
Primary Diagnosis: 12/25/06 844.2 Sprain Of Cruciate Ligament Of Knee
Other Diagnosis: 07/11/07 781.2 Abnormality Of Gait

Preferred Practice Pattern: Musculoskeletal E: Impaired joint mobility, motor function, muscle performance, ROM associated w/localized inflammation

Recent Physical Therapy: Outpatient rehab clinic - within the last sixty days

Prior Functional Status: Independent with no pain or limitation in ambulation, IADL's, work or recreation

Required Equipment: Ace wrap for knee; Crutches

Weight Bearing Status: Right lower extremity - 25% partial weight bearing

Safety Measures: Ambulate with an assistive device & assistance of another person
Instruct patient and/or family in safety precautions
Progressive activity as tolerated

Rehabilitative Prognosis: Excellent rehab potential to reach and maintain prior level of function

Mental Status: Alert and oriented in all spheres - cooperative and motivated

Concerns that led to PT: Decreased functional ability secondary to pain or increased pain

System Review, History: This 45 y. o. male presents with a diagnosis of right anterior cruciate ligament sprain with an onset date of 12/25/06 when he fell down the porch steps while carrying packages. He is seen initially on this date for evaluation and treatment by this therapist due to persistent pain and limited ambulation. Previous medical history of insignificance. The patient is motivated to participate in treatment to achieve his functional goal of propelling his car and returning to work in rock quarry.

Patient has a history of behavioral health risks: No

Patient / Caregiver concur with established goals: Yes

Patient is aware of and understands his/her diagnosis and prognosis: Yes

Functional Measures

Ambulation: Even Terrain

Current Level: Crutches - Supervision - Standby assistance
Goal: No assistive device - Independent with difficulty

Distance
100 Feet
>1,000'
Ambulation: Uneven Terrain

<table>
<thead>
<tr>
<th>Current Level:</th>
<th>Crutches - Extensive - Moderate assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Goal:</td>
<td>Straight cane - Independent</td>
</tr>
</tbody>
</table>

Distance: 35 Feet

100 Feet

Stair Climbing

<table>
<thead>
<tr>
<th>Current Level:</th>
<th>Crutches - Extensive - Moderate assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Goal:</td>
<td>Straight cane - Independent</td>
</tr>
</tbody>
</table>

Steps: 4 Steps

15 Steps

Tolerance to IADLs

<table>
<thead>
<tr>
<th>Current Level:</th>
<th>Moderate - Severe pain and limitation during and/or after a specific IADL affecting performance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Goal:</td>
<td>No pain nor limitation during and/or after a specific IADL affecting performance</td>
</tr>
</tbody>
</table>

Tolerance to Work Activities

<table>
<thead>
<tr>
<th>Current Level:</th>
<th>Moderate - Severe pain and limitation in a specific work activity affecting performance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Goal:</td>
<td>No pain and limitation in a specific work activity affecting performance</td>
</tr>
</tbody>
</table>

Functional characteristics and analysis: Mr. Flintstone is having difficulty in ambulation and requires moderate assistance with crutches on uneven terrain to maintain 25% weight bearing status for the right lower extremity. Due to this limitation, he is not able to propel his car, or climb into the crane for work at the quarry.

Impairment Goals; Short Term: Joint inflammation, or restriction & pain are reduced by 50% in 2 weeks

Pain is decreased by 50% in 2 weeks

Functional Goals; Long Term: Ambulation/stair climbing are improved to prior level of function

Work performance in related activities is improved to prior level of function

Physical Findings

Pain

Site: Joint Pain - Knee - Right; At Rest 5/10; With Activity 8/10; Dull; Cramping; Radiating

Exacerbating Factors: At rest interrupting sleep; Weight bearing beyond recommendations; Extended periods of time without joint elevation

Relieving Factors: Ice to the affected area; Elevation of effected extremity

Goals for Pain: Decrease pain at rest and during weight bearing activities to 0/10.

Pain Medication: Non-Prescription

Additional Comments: Mr. Flintstone is taking Advil 3 times daily for pain.

Dynamic Balance

Current Level: 1/5 Berg Balance Scale -Scored 0-12 High risk of falls

Goal: 5/5 Berg Balance Scale -Scored 50-56 Low risk of falls

Special Orthopedic Tests of Extremities

Knee - Anterior drawer test - Indicates a tear of the anterior cruciate ligament: Positive

Knee - Apley compression test - Indicates a meniscus tear: Negative

Palpation

Location: Joint - knee - Right

Finding: Edema - generalized and moderate

Location: Joint - knee - Right

Finding: Joint restriction - moderate

Location: Joint - knee - Right

Finding: Pain - moderate with palpation
**Girth**

<table>
<thead>
<tr>
<th>Location</th>
<th>Right Side</th>
<th>Left Side</th>
</tr>
</thead>
<tbody>
<tr>
<td>Knee Joint Line</td>
<td>52 cm</td>
<td>44 cm</td>
</tr>
<tr>
<td>Knee Joint Line + 16 cm</td>
<td>48 cm</td>
<td>38 cm</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Initial Eval Level</th>
<th>Goal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Knee</td>
<td></td>
</tr>
<tr>
<td>Strength</td>
<td></td>
</tr>
<tr>
<td>Active ROM</td>
<td></td>
</tr>
<tr>
<td>Passive ROM</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Flexion</th>
<th>Extension</th>
</tr>
</thead>
<tbody>
<tr>
<td>Right</td>
<td>Left</td>
</tr>
<tr>
<td>3/5</td>
<td>2+/5</td>
</tr>
<tr>
<td>5/5</td>
<td>5/5</td>
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<tr>
<td>71°</td>
<td>-20°</td>
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<tr>
<td>145°</td>
<td>0°</td>
</tr>
<tr>
<td>140°</td>
<td>140°</td>
</tr>
<tr>
<td>145°</td>
<td>145°</td>
</tr>
</tbody>
</table>

**Knee Comments:** Joint play is moderate-severely limited in posterior and forward movements of tibia on femur, and medial and lateral translation of tibia on femur.

**Impairment Observations**

The right knee is swollen and painful with palpation, movement and weight bearing >25% on the right lower extremity. Strength and range of motion in right knee is impaired and will be assessed with each treatment.

**Interventions (CPT Code)**

- Physical Therapy Evaluation 97001
- Gait Training &/or Stair Climbing - Therapeutic Procedure - 1+ Areas 97116
- Therapeutic Exercises - Therapeutic Procedure - 1+ Areas 97110
- Ultrasound - Modality to 1+ Areas - Each 15 Min 97035

**Frequency of PT:** Three times weekly

**Duration of PT:** 6 weeks

**Signature:**

Thomas Hook, PT

01/15/07

State License #: 310
Physical Therapy

Ten (10) Visit Progress Report

Patient Name: Flintstone, Frederick
Medical Record #: 123
Account #: 1234567892
Provider: Lakeside Rehabilitation
Provider #: 25489631

Certification From: 02/15/07
Service From: 01/15/07
Certification To: 03/15/07
Service To: 03/15/07

Patient Information

Address: 123 Opry Way
Nashville, Tennessee 37203
Occupation: Engineer
Gender: Male
Contact Person: Wilma Flintstone

Physician: James L. Smith, MD
Physician #: 123

# of Approved Visits: 12
Medicare #: 111-22-2333A

General Information

Primary Diagnosis:
- Code: 844.2
- Description: Sprain Of Cruciate Ligament Of Knee
- Onset Date: 12/25/06

Other Diagnosis:
- Code: 781.2
- Description: Abnormality Of Gait
- Onset Date: 07/11/07

There has been a change in Diagnosis: No
There has been a change in Support System: No
Patient is making steady progress toward established goals: Yes
There has been adequate communication with all health care staff involved in the implementation of the Plan of Care: Yes
Patient/Caregiver continues to concur with proposed TX Plan: Yes
Level of Patient/Caregiver's satisfaction with Therapy: High

Additional Comments: Mr. Flintstone has had the flu for over two weeks of the last treatment period, requiring a reduction in frequency to twice weekly. He is now able to tolerate three times a week of therapy.

Functional Measures

Ambulation: Even Terrain

Initial: Crutches - Supervision - Standby assistance
Current Level: No assistive device - Limited - Contact guard assistance
Goal: No assistive device - Independent with difficulty
Distance: 100 Feet

Ambulation: Uneven Terrain

Initial: Crutches - Extensive - Moderate assistance
Current Level: Straight cane - Limited - Contact guard assistance
Goal: Straight cane - Independent
Distance: 35 Feet

Stair Climbing

Initial: Crutches - Extensive - Moderate assistance
Current Level: Straight cane - Limited - Minimal assistance with railing
Goal: Straight cane - Independent
Steps: 4 Steps
Knee Comments: Joint play is now only mildly limited in posterior and forward movements of tibia on femur.

Impairment Observations

The right knee edema and pain are greatly reduced. Right knee range of motion and strength are increased allowing for improved ambulation and weight bearing as tolerated on the right lower extremity.

Interventions (CPT Code)

Gait Training &/or Stair Climbing - Therapeutic Procedure - 1+ Areas 97116
Therapeutic Exercises - Therapeutic Procedure - 1+ Areas 97110
Ultrasound - Modality to 1+ Areas - Each 15 Min 97035
97010

Frequency of PT: Three times weekly
Duration of PT: 4 weeks

Thomas Hook, PT 02/15/07
State License #: 310
**Tolerance to Work Activities**

<table>
<thead>
<tr>
<th>Initial</th>
<th>Moderate - Severe pain and limitation in a specific work activity affecting performance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current Level</td>
<td>Mild - Moderate pain and limitation in a specific work activity affecting performance</td>
</tr>
<tr>
<td>Goal</td>
<td>No pain and limitation in a specific work activity affecting performance</td>
</tr>
</tbody>
</table>

**Functional characteristics and analysis:**
Mr. Flintstone is making progress in ambulation as he is able to ambulate with straight cane on uneven terrain, and with no assistive device on even terrain. He is still unable to safely perform the duties of his job due to limitations in ambulatory status.

**Impairment Goals; Short Term:**
- Joint inflammation, or restriction is reduced by 50% in 2 weeks - Met
- Pain is decreased by 50% in 2 weeks - Met

**Functional Goals; Long Term:**
- Ambulation/stair climbing are improved to prior level of function
- Work performance in related activities is improved to prior level of function

**Physical Findings**

**Pain**

<table>
<thead>
<tr>
<th>Site</th>
<th>Joint Pain - Knee - Right; At Rest 2/10; With Activity 5/10; Sharp; Dull; Burning; Electrical; Cramping; Radiating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Exacerbating Factors</td>
<td>Walking; Standing for 3 minutes or more; Extended periods of time without joint elevation</td>
</tr>
<tr>
<td>Relieving Factors</td>
<td>Ice to the affected area; Elevation of effected extremity</td>
</tr>
<tr>
<td>Goals for Pain</td>
<td>Decrease pain at rest and during weight bearing activities to 0/10.</td>
</tr>
</tbody>
</table>

**Pain Medication:** Non-Prescription

**Additional Comments:** Mr. Flintstone continues to take Advil 3 times daily for pain.

**Dynamic Balance**

<table>
<thead>
<tr>
<th>Initial</th>
<th>1/5 Berg Balance Scale -Scored 0-12 High risk of falls</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current Level</td>
<td>4/5 Berg Balance Scale -Scored 37-49 Moderate to low risk of falls</td>
</tr>
<tr>
<td>Goal</td>
<td>5/5 Berg Balance Scale -Scored 50-56 Low risk of falls</td>
</tr>
</tbody>
</table>

**Special Orthopedic Tests of Extremities**

- Knee - Anterior drawer test - Indicates a tear of the anterior cruciate ligament | Negative
- Knee - Apley compression test - Indicates a meniscus tear | Negative

**Palpation**

<table>
<thead>
<tr>
<th>Location</th>
<th>Joint - knee - Right</th>
</tr>
</thead>
<tbody>
<tr>
<td>Finding</td>
<td>Edema - generalized and mild</td>
</tr>
<tr>
<td>Location</td>
<td>Joint - knee - Right</td>
</tr>
<tr>
<td>Finding</td>
<td>Skin temperature - cool to touch</td>
</tr>
<tr>
<td>Location</td>
<td>Joint - knee - Right</td>
</tr>
<tr>
<td>Finding</td>
<td>Pain - mild with palpation</td>
</tr>
</tbody>
</table>

**Girth**

<table>
<thead>
<tr>
<th>Location</th>
<th>Knee Joint Line</th>
</tr>
</thead>
<tbody>
<tr>
<td>Right Side</td>
<td>40 cm Left Side</td>
</tr>
<tr>
<td>Location</td>
<td>Knee Joint Line + 4 cm proximal</td>
</tr>
<tr>
<td>Right Side</td>
<td>46 cm Left Side</td>
</tr>
</tbody>
</table>
### Physical Therapy Discharge Summary

<table>
<thead>
<tr>
<th>Patient Name:</th>
<th>Flintstone, Frederick</th>
<th>Date:</th>
<th>03/15/07</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical Record #:</td>
<td>123</td>
<td>DOB:</td>
<td>08/02/61</td>
</tr>
<tr>
<td>Account #:</td>
<td></td>
<td>Treating Clinician:</td>
<td>Thomas Hook, PT</td>
</tr>
<tr>
<td>Provider:</td>
<td>Lakeside Rehabilitation</td>
<td>Physician:</td>
<td>James L. Smith, MD</td>
</tr>
<tr>
<td>Provider #:</td>
<td>25489631</td>
<td>Physician #:</td>
<td>123</td>
</tr>
</tbody>
</table>

#### Patient Information

- **Address:** 123 Opry Way, Nashville, Tennessee 37203
- **Occupation:** Engineer
- **Gender:** Male
- **Contact Person:** Wilma Flintstone
- **Physician:** James L. Smith, MD
- **Physician #:** 123
- **# of Approved Visits:** 12
- **Medicare #:** 111-22-2333A
- **Medicaid #:**

#### Discharge Information

<table>
<thead>
<tr>
<th>Primary Diagnosis:</th>
<th>Onset Date</th>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>12/25/06</td>
<td>844.2</td>
<td></td>
<td>Sprain Of Cruciate Ligament Of Knee</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Other Diagnosis:</th>
<th>Onset Date</th>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>07/11/07</td>
<td>781.2</td>
<td></td>
<td>Abnormality Of Gait</td>
</tr>
</tbody>
</table>

#### Preferred Practice Pattern:

- Musculoskeletal E: Impaired joint mobility, motor function, muscle performance, ROM associated w/localized inflammation

#### Reasons for Discharge:
- Goals Met; Maximal Level Reached
- No further Physical Therapy intervention is indicated at this time in this setting? Yes
- Patient's Physician has been notified that patient has been discharged from Physical Therapist's care? Yes

#### Functional Measures

##### Ambulation: Even Terrain

<table>
<thead>
<tr>
<th>Initial:</th>
<th>Goal:</th>
<th>Final Level:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Crutches - Supervision - Standby assistance</td>
<td>No assistive device - Independent with difficulty</td>
<td>No assistive device - Independent</td>
</tr>
</tbody>
</table>

- Distance: 100 Feet
- Distance: >1,000'
- Distance: Unlimited

##### Ambulation: Uneven Terrain

<table>
<thead>
<tr>
<th>Initial:</th>
<th>Goal:</th>
<th>Final Level:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Crutches - Extensive - Moderate assistance</td>
<td>Straight cane - Independent</td>
<td>Straight cane - Independent</td>
</tr>
</tbody>
</table>

- Distance: 35 Feet
- Distance: 100 Feet
- Distance: 100 Feet

##### Stair Climbing

<table>
<thead>
<tr>
<th>Initial:</th>
<th>Goal:</th>
<th>Final Level:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Crutches - Extensive - Moderate assistance</td>
<td>Straight cane - Independent</td>
<td>No assistive device - Independent with railing</td>
</tr>
</tbody>
</table>

- Steps: 4
- Steps: 15
- Steps: 15

#### Tolerance to Work Activities

<table>
<thead>
<tr>
<th>Initial:</th>
<th>Goal:</th>
<th>Final Level:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Moderate - Severe pain and limitation in a specific work activity affecting performance</td>
<td>No pain and limitation in a specific work activity affecting performance</td>
<td>No pain and limitation in a specific work activity affecting performance</td>
</tr>
</tbody>
</table>

#### Functional characteristics and analysis:

- Mr. Flintstone has made excellent progress and is now independent and safe in ambulation on even terrain. He is able to return to his job of crane operator at the rock quarry, given additional time to climb into the crane cabin.
Physical Therapy

Discharge Summary

<table>
<thead>
<tr>
<th>Functional Goals; Long Term:</th>
<th>Ambulation/stair climbing are improved to prior level of function - Met</th>
</tr>
</thead>
<tbody>
<tr>
<td>Work performance in related activities is improved to prior level of function - Met</td>
<td></td>
</tr>
</tbody>
</table>

Physical Findings

Pain

Site: Joint Pain - Knee - Right; At Rest 0/10; With Activity 0/10; Sharp; Dull; Burning; Electrical; Cramping; Localized

Goals for Pain: Decrease pain at rest and during weight bearing activities to 0/10 - Goal Met

Pain Medication: None

Dynamic Balance

Initial: 1/5 Berg Balance Scale -Scored 0-12 High risk of falls

Goal: 5/5 Berg Balance Scale -Scored 50-56 Low risk of falls

Final Level: 5/5 Berg Balance Scale -Scored 50-56 Low risk of falls

Special Orthopedic Tests of Extremities

Knee - Anterior drawer test - Indicates a tear of the anterior cruciate ligament Negative

Knee - Apley compression test - Indicates a meniscus tear Negative

Palpation

Location: Joint - knee - Right

Finding: Edema - Resolved

Location: Joint - knee - Right

Finding: Skin temperature - cool to touch

Girth

Location: Knee Joint Line

Right Side: 37 cm

Location: Knee Joint Line + 4 cm proximal

Right Side: 43 cm

Knee Initial Eval Level

<table>
<thead>
<tr>
<th>Strength</th>
<th>Right</th>
<th>Left</th>
</tr>
</thead>
<tbody>
<tr>
<td>Flexion</td>
<td>3/5</td>
<td>5/5</td>
</tr>
<tr>
<td>Extension</td>
<td>2+/5</td>
<td>5/5</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Active ROM</th>
<th>Right</th>
<th>Left</th>
</tr>
</thead>
<tbody>
<tr>
<td>Flexion</td>
<td>71°</td>
<td>145°</td>
</tr>
<tr>
<td>Extension</td>
<td>-20°</td>
<td>0°</td>
</tr>
</tbody>
</table>

Knee Passive ROM

<table>
<thead>
<tr>
<th>Passive ROM</th>
<th>Right</th>
<th>Left</th>
</tr>
</thead>
<tbody>
<tr>
<td>Flexion</td>
<td>85°</td>
<td>145°</td>
</tr>
<tr>
<td>Extension</td>
<td>-15°</td>
<td>0°</td>
</tr>
</tbody>
</table>

Knee Final Level

<table>
<thead>
<tr>
<th>Strength</th>
<th>Right</th>
<th>Left</th>
</tr>
</thead>
<tbody>
<tr>
<td>Flexion</td>
<td>5/5</td>
<td>5/5</td>
</tr>
<tr>
<td>Extension</td>
<td>5/5</td>
<td>5/5</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Active ROM</th>
<th>Right</th>
<th>Left</th>
</tr>
</thead>
<tbody>
<tr>
<td>Flexion</td>
<td>145°</td>
<td>145°</td>
</tr>
<tr>
<td>Extension</td>
<td>0°</td>
<td>0°</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Passive ROM</th>
<th>Right</th>
<th>Left</th>
</tr>
</thead>
<tbody>
<tr>
<td>Flexion</td>
<td>145°</td>
<td>145°</td>
</tr>
<tr>
<td>Extension</td>
<td>145°</td>
<td>145°</td>
</tr>
</tbody>
</table>

Impairment Observations

Range of motion and strength are functional in right knee and will continue to improve with use. Pain and edema in right knee are resolved.

Mr. Flintstone has demonstrated competence and understanding of his discharge home exercise program.

Interventions (CPT Code)

Discharge patient to care of self

Thomas Hook, PT

State License #: 310
<table>
<thead>
<tr>
<th>Primary Diagnosis</th>
<th>Onset Date</th>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>12/25/06</td>
<td>844.2</td>
<td>Sprain Of Cruciate Ligament Of Knee</td>
<td></td>
</tr>
<tr>
<td>Other Diagnosis</td>
<td>07/11/07</td>
<td>781.2</td>
<td>Abnormality Of Gait</td>
</tr>
</tbody>
</table>

**Comments:**
- Patient is too ill to tolerate the current frequency of therapy.
- Mr. Flintstone has been battling the flu for a week now and for the next two weeks can only tolerate therapy twice a week.

**Plan/Orders:**
- Decrease therapy treatment sessions to two times weekly

---

**I certify the need for these services furnished under this plan of treatment while under my care.**

- James L. Smith, MD
- Date: 01/24/07

**Treating Clinician:**
- Thomas Hook, PT
- State License #: 310
Missed Visit Report

<table>
<thead>
<tr>
<th>Date</th>
<th>01/19/07</th>
</tr>
</thead>
<tbody>
<tr>
<td>DOB</td>
<td>08/02/61</td>
</tr>
<tr>
<td>Provider</td>
<td>Lakeside Rehabilitation</td>
</tr>
<tr>
<td>Provider #</td>
<td>25489631</td>
</tr>
</tbody>
</table>

**Patient Name:** Flintstone, Frederick  
**Medical Record #:** 123  
**Account #:** 1234567892  
**Primary Diagnosis:** 12/25/06 844.2 Sprain Of Cruciate Ligament Of Knee  
**Other Diagnosis:** 07/11/07 781.2 Abnormality Of Gait  

**Patient did not receive therapy today for the following reason:**  
Patient request to not have therapy due to personal conflicts.

**Plan:**  
Continue with 3 times weekly therapy

**Comments:**  
Patient is out of town on vacation.

**Treating Clinician:** Thomas Hook, PT  
**State License #:** 310
**Physical Therapy**  

<table>
<thead>
<tr>
<th>Patient Name:</th>
<th>Flintstone, Frederick</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical Record #:</td>
<td>123</td>
</tr>
<tr>
<td>Account #:</td>
<td>1234567892</td>
</tr>
<tr>
<td>Provider #:</td>
<td>25489631</td>
</tr>
<tr>
<td>Provider:</td>
<td>Lakeside Rehabilitation</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Onset Date</th>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>06/10/07</td>
<td>844.2</td>
<td>Sprain Of Cruciate Ligament Of Knee</td>
</tr>
<tr>
<td>06/10/07</td>
<td>719.7</td>
<td>Difficulty in Walking</td>
</tr>
</tbody>
</table>

**Date of Injury:** 12/25/06  
**Injured at Work:** Yes  
**Date of First Exam:** 12/27/06  
**Has Employer been notified:** Yes  
**Date last worked:** 12/25/06  

**Patient's Statement:** I slipped on the steps and twisted my knee when I fell.

**Is Diagnosis consistent with occupational causation or aggravation:** Yes  
**Is there any other condition that will impede or delay patient's recovery:** No

**Physician's decision on Patient's Work Status:** May work but must adhere to following restrictions at this time

**Restrictions:**  
- No excessive walking  
- No Prolonged standing  
- No use of affected extremity

**Additional Comments on Work Related Injury:** Mr. Flintstone is not able to safely perform the duties of his job due to his limitations in ambulation and weight bearing.

---

[Signature]

Date: 01/15/07  
Thomas Hook, PT  
State License #: 310
### PLAN OF TREATMENT FOR OUTPATIENT REHABILITATION

**1. PATIENT’S LAST NAME**
- Flintstone

**2. PROVIDER NO.**
- 25489631

**3. HICN**
- 111-22-2333A

**4. PROVIDER NAME**
- Lakeside Rehabilitation

**5. MEDICAL RECORD NO.**
- 123

**6. ONSET DATE**
- 01/15/07

**7. SOC DATE**
- 01/15/07

**8. TYPE:**
- Physical Therapy

**9. PRIMARY DIAGNOSIS**
- Sprain Of Cruciate Ligament Of Knee 844.2

**10. TREATMENT DIAGNOSIS**
- Abnormality Of Gait 781.2

**11. VISITS FROM SOC**
- 1

**12. PLAN OF TREATMENT FUNCTIONAL GOALS**

<table>
<thead>
<tr>
<th>Impairment Goals: Short Term:</th>
<th>Joint inflammation, or restriction &amp; pain are reduced by 50% in 2 weeks; Pain is decreased by 50% in 2 weeks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Functional Goals: Long Term:</td>
<td>Ambulation/stair climbing are improved to prior level of function Work performance in related activities is improved to prior level of function</td>
</tr>
</tbody>
</table>

**13. SIGNATURE**
- (professional estab. POC incl. prof. designation)
- 01/15/07

**14. FREQ/DURATION**
- (e.g., 3/Wk x 4 Wk)
- FREQUENCY: Three times weekly
- DURATION: 6 weeks

**15. PHYSICIAN SIGNATURE**
- James L. Smith, MD

**16. DATE**
- 01/15/07

**17. CERTIFICATION**
- FROM 01/15/07 TO 02/15/07

**18. ON FILE**
- (Print/type physician's name)
- James L. Smith, MD

**19. PRIOR HOSPITALIZATION**
- FROM 12/26/06 TO 12/28/06

**20. INITIAL ASSESSMENT**
- (History, medical complications, level of function at start of care, Reason for referral)
- Prior Functional Status: Independent with no pain or limitation in ambulation, IADL’s, work or recreation
- Pref Practice Pattern: Musculoskeletal E: Impaired joint mobility, motor function, muscle performance, ROM associated w/localized inflammation
- Rehab Prognosis: Excellent rehab potential to reach and maintain prior level of function; Level of Ambulation - Flat: Crutches - Supervision - Standby assistance 100 Feet; Level of Ambulation - Uneven: Crutches - Extensive - Moderate assistance 35 Feet; Stair Climbing: Crutches - Extensive - Moderate assistance 4 Steps; Tolerance to IADLs: Moderate - Severe pain and limitation during and/or after a specific IADL affecting performance; Tolerance to Work Activities: Moderate - Severe pain and limitation in a specific work activity affecting performance; Physical - Dynamic Balance: 1/5 Berg Balance Scale -Scored 0-12 High risk of falls; Pain: Joint Pain - Knee - Right; At Rest 5/10; With Activity 8/10; Dull; Cramping; Radiating

**21. FUNCTIONAL LEVEL**
- (End of billing period) 01/15/07

**22. SERVICE DATES**
- FROM 01/15/07 TO 03/15/07

---

**Impairment Observations:** The right knee is swollen and painful with palpation, movement and weight bearing >25% on the right lower extremity. Due to this limitation, he is not able to propel his car, or climb into the crane for work at the quarry.

---

**Functional Characteristics and Analysis:** Mr. Flintstone is having difficulty in ambulation and requires moderate assistance with crutches on uneven terrain to maintain 25% weight bearing status for the right lower extremity. Due to this limitation, he is not able to propel his car, or climb into the crane for work at the quarry.
## PLAN OF TREATMENT FOR OUTPATIENT REHABILITATION

**1. PATIENT'S LAST NAME**  
Flintstone

**FIRST NAME**  
Frederick

**M.I.**  

**2. PROVIDER NO.**  
25489631

**3. HICN**  
111-22-2333A

**4. PROVIDER NAME**  
Lakeside Rehabilitation

**5. MEDICAL RECORD NO.**  
123

(Optional)

**6. ONSET DATE**  
12/25/06

**7. SOC DATE**  
01/15/07

**8. TYPE:**  
Physical Therapy

**9. PRIMARY DIAGNOSIS**  
Sprain Of Cruciate Ligament Of Knee 844.2

(Pert. Med. DX)

**10. TREATMENT DIAGNOSIS**  
Abnormality Of Gait 781.2

**11. VISITS FROM SOC**  
3

---

### PROGRESS REPORT  
**02/15/07**

- **Level of Ambulation - Flat:** No assistive device - Limited - Contact guard assistance 200 Feet
- **Level of Ambulation - Uneven:** Straight cane - Limited - Contact guard assistance 100 Feet
- **Stair Climbing:** Straight cane - Limited - Minimal assistance with railing 10 Steps
- **Tolerance to Work Activities:** Mild - Moderate pain and limitation in a specific work activity affecting performance
- **Physical - Dynamic Balance:** 4/5 Berg Balance Scale -Scored 37-49 Moderate to low risk of falls
- **Pain:** Joint Pain - Knee - Right; At Rest 2/10; With Activity 5/10; Sharp; Dull; Burning; Electrical; Cramping; Radiating

Functional Characteristics and Analysis: Mr. Flintstone is making progress in ambulation as he is able to ambulate with straight cane on uneven terrain, and with no assistive device on even terrain. He is still unable to safely perform the duties of his job due to limitations in ambulatory status.

Impairment Observations: The right knee edema and pain are greatly reduced. Right knee range of motion and strength are increased allowing for improved ambulation and weight bearing as tolerated on the right lower extremity.