



631 South F 1 Lane
Lodi, CA 942
(209) 368-7433
FAX: 209-368-4219

Pr ess Report

Date: 1-20-12
To: MURRAY

RE: Anderson,
PT: PB

DOB:	<u>1E</u>
SOC:	
Diagnosis:	
Onset:	
Visits:	<u>7/8</u>
Frequency:	<u>2x4</u>

Patient Subjectively: ☐ Resolved ☐ Improving ☐ Unchanged

Objective/Assessment: MS. Anderson displays full
ROM in R knee but only able to squat to 70°
knee w/ 2° LDB 1 sig medial collapse.
The pt demo sig med. collapse at knees &
sig pronation at feet & single & 2-legged squatting. The pt demo
4-15 B) Glut med strength. The pts main complaints of ph
are soreness at the B) medial joint line & tenderness at the
insertion of pes Anserine. The pt demo improved endurance
but has cont soreness & fatigue with repetitive lunging &
squatting activities. Pt to cont for improved LE mechanics

Functional Goals: & app. tol & endurance
for return to
work.

Status Update:

1 Met
2 75%
3 25-50%

Treatment Received

- ☐ Therapeutic Exercise
- ☐ Soft Tissue Mobilization
- ☐ Neuromuscular Re-Education
- ☐ Manual Therapy
- ☐ Mechanical Traction
- ☐ Home Program/ Patient Education
- ☐ Ice/Heat
- ☐ Ultrasound
- ☐ Electrical Stimulation
- ☐ Other: _____

Plan of Care

- ☐ Continue Current Treatment 2 x 4
- ☐ Home Program
- ☐ Gym Program
- ☐ Other: _____

☐ Discharge
Reason: _____

Therapist Signature: _____

Provider #: _____

Please Sign below to Refer Patient For Continuation of Physical Therapy Treatment

PHYSICIAN SIGNATURE: _____ DATE: _____

1-20-12

1-10-12



631 South Ham Lane
Lodi, CA 95242
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FAX: 209-368-4219

PROGRESS REPORT

Date: 1-20-12

To: Gary Murata, M.D.

RE: ANDERSON, Tiffany

PT: PIPER BARNES, P.T., D.P.T.

DOB: 8-22-1970

SOC: 12-15-11

Diag: 719.46, V54.9, 719.7

Onset: DOS: 11-21-11

Visits: 7 of 8

Frequency: 2Xwk/4wks

Patient Subjectively: ☐ Resolved ☒ Improving ☐ Unchanged

Objective/Assessment:

Ms. Anderson displays full range of motion in right knee but only able to squat with 70° knee flexion secondary to loss of balance and significant medial collapse.

The patient demonstrates significant medial collapse at knees and significant pronation at feet with single and 2-legged squatting.

The patient demonstrates 4-/5 bilateral glut medius strength. The patient's main complaints of pain are soreness at the right medial joint line and tenderness at the insertion of pes anserine. The patient demonstrates improved endurance but has continued soreness and fatigue with repetitive lunging and squatting activities.

Patient to continue for improve lower extremity mechanics and appropriate tolerance endurance for return to work.

Functional Goals:

1. Patient able to ambulate 20 minutes for short community ambulation with 2/10 right knee pain in 6 visits.
2. Patient able to bend, squat and lunge with 2/10 right knee pain in 12 visits.
3. Patient able to ambulate on uneven surface, step in/out of truck and lift 30 lbs. with 2/10 right knee pain in 18-24 visits.

Status Update:

1. Met
2. 75%
3. 25-50%

Plan of Care

- ☒ Continue Current Treatment: 2Xwk/4wks
☐ Home Program
☐ Gym Program
☐ Other:
☐ Discharge Reason:

Treatment Received

- ☒ Therapeutic Exercise
☒ Soft Tissue Mobilization
☐ Neuromuscular Re-Education
☒ Manual Therapy
☐ Mechanical Traction
☒ Home Program/ Patient Education
☒ Ice/Heat
☐ Ultrasound
☒ Electrical Stimulation
☐ Other:

I have reviewed this plan of treatment, and recertify a continuing need for physical therapy services.

PHYSICIAN SIGNATURE: X

DATE: _____

Therapist Signature: PBanner

Provider: PT 37431