

DAILY NOTE

PATIENT'S NAME:

Tiffany Andersen

DATE:

4/14/09

Visit #:

116

Subjective: Pt 40 pain in knee since cutting brush at work on 3/24/09 and going up incline. Aggs: sitting > 2-3 hrs, gas pedal, stepping up stairs, squat, on/off toilet. Ease: ea pills 4x/day, bike riding, ice, Iuprofen

3x/day. PLOF: Pt has to be on feet 6 hrs per day, walk on uneven ground, ladders, get in/out of truck ~20x/day.

Objective/Treatment: Initial Evaluation Re-evaluation Completed

E-Stim. To knee Type IFC Time 15

Ultrasound/Phonophoresis to med knee Cont. Pulsed 20 % x 6 min. @ 1.0 W/cm²

Traction: Cervical/Lumbar Cont/Inter. @ _____ lb. x _____ min. (on _____ /off _____)

Hot Pack to: _____ x _____ min.

Cold Pack to knee x 15 min.

Aquatic Therapy, see flow sheet. x _____ min.

Therapeutic Exercises, see flow sheet. x 15 min.

Manual Therapy Technique x _____ min.:

HEP issued: stretching

Case Conference with PTA

Other, describe: _____

✓ 82° 3 pain quads 4/15
✓ 130° 0 pain hams 5/15 @
✓ 10° min ~~DS~~ hip add 5/15 @
tender to palpation of pesansarini + med
99stroc heads. Post horn of lateral meniscus
ligaments intact pt able to do 85° squats

Assessment: See eval

Plan: Progress per treatment plan

Re-evaluate

Discharge

See eval

Therapist: [Signature]

RX 4110109 BX 2

DATE:

Visit #:

Subjective: _____

Objective/Treatment: Initial Evaluation / Re-evaluation Completed

E-Stim. To _____ Type _____ Time _____

Ultrasound/Phonophoresis to _____ Cont. / Pulsed _____ % x _____ min. @ _____ W/cm²

Traction: Cervical/Lumbar Cont/Inter. @ _____ lb. x _____ min. (on _____ /off _____)

Hot Pack to: _____ x _____ min.

Cold Pack to: _____ x _____ min.

Aquatic Therapy, see flow sheet. x _____ min.

Therapeutic Exercises, see flow sheet. x _____ min.

Manual Therapy Technique x _____ min.:

HEP issued:

Case Conference with PTA

Other, describe: _____

Assessment: _____

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Plan: Progress per treatment plan

Re-evaluate

Discharge

Therapist: _____