

DAILY NOTE
Work Conditioning

PATIENT'S NAME: Tiffany Anderson

DATE:

7/25/12

Visit #:

12

Patient Reported Status (Today and Overall):

pt is feeling good. pt cut down longer distance walking and tingling and leg went away.

Objective/Treatment:

Initial Evaluation / Re-evaluation Completed

Time: _____

Therapeutic Exercise/Activity, see flow sheet. x 180 min.

HEP issued:

Case Conference with PTA

Other, describe: _____

Patients Response To Treatment / Patient Needs:

pt did well today, had good effort and required less cuing on their ex. pt able to do more vertical obstacles today on her course. pt able to carry 15 lbs with her today & c/o @ knee pain w/ 20 tingling.

Rational For Skilled Care: A has limited stability in her @ knee & need strength in the knee and hips.

Total Treatment Time:

2 Hrs

3 Hrs _____

4 Hrs _____

Plan:

Progress per treatment plan

Re-evaluate

Discharge

Therapist: Candice [Signature]

P.T.A.: _____

- Monty Merrill PT
- Brijpal Pataria PT
- Piper Barnes PT
- Renee Mercado PT
- Sarah Tompkins PT

- Lauri Merrill PT
- Danielle Sartori PT
- Fatema Ghani PT
- Zachary Mertz PT

RX: 3/7/12

F & D: LAP

AUTH: 12

EXP: X