SH, INC. dba LODI PHYSICAL THERAPY 631 S HAM LANE LODI, CALIFORNIA 95242 DAILY NOTE

TE: 0/10/08	Subjective: Pt still very achy, staris getting better
1#:	Objective/Treatment: O Initial Evaluation / Re-evaluation Completed O E-Stim. To Type Setting Time O Ultrasound/Phonophoresis to Cont. / Pulsed % × min. @ W/cm² O Traction: Cervical/Lumbar Cont/Inter. @ lb. × min. (on /off) O Hot Pack to: x min. min. (on /off)
	O Cold Pack to: x min. O Aquatic Therapy, see flow sheet. x min. O Therapeutic Exercises, see flow sheet. x min. O Therapeutic Activities, see flow sheet. x min. O Manual Therapy Technique x min.: O Neuro-muscular re-educ, see flow sheet x min.: O HEP issued: O Other, describe:
. F. S	Assessment: Pt and will is new turex. Pt had discounter in calfford hallesistants in the management of reformer. It doing will i an progression. Pt will be at home.
	Plan: ORe-evaluate ODischarge
X /	Therapist: Denulle Santaw, 45
X /	Therapist: Daniele Sankow, 45
E:	Therapist: Dutle Starker, 75 Old Subjective: knee is doing well. Toking on pile 4x I day. Objective/Treatment: O Initial Evaluation / Re-evaluation Completed E-Stim. To a knee Type if Setting hi Time is O Ultrasound/Phonophoresis to Cont. / Pulsed % x min. @ W/cm² O Traction: Cervical/Lumbar Cont/Inter. @ Ib. x min. (on /off) O Hot Pack to: x min.
TE:	Therapist: Poulle Sanfaw, FT Oltile Subjective: Knee is closing well. Toking pain puls 4x1day. Objective/Treatment: O Initial Evaluation / Re-evaluation Completed E-Stim. To R knee Type FC Setting high Time IS O Ultrasound/Phonophoresis to Cont. / Pulsed % x min. @ W/cm² O Traction: Cervical/Lumbar Cont/Inter. @ Ib. x min. (on /off) O Hot Pack to: x min. © Cold Pack to: R knee X IS min. O Aquatic Therapy, see flow sheet x min. Therapeutic Exercises, see flow sheet x min. O Manual Therapy Technique x min.: O Neuro-muscular re-educ, see flow sheet x min.: O Neuro-muscular re-educ, see flow sheet x min.: O Other, describe:
TE:	Therapist: Decille Stanfant, TT Oltile Subjective: knee is doing well. Toking san pale 4x leav. Objective/Treatment: O Initial Evaluation / Re-evaluation Completed E-Stim. To R knee Type FC Setting ht Time IS O Ultrasound/Phonophoresis to Cont. / Pulsed % x min. @ W/cm² O Traction: Cervical/Lumbar Cont/Inter. @ Ib. x min. (on /off) O Hot Pack to: x min. Cold Pack to: R knee x 15 min. O Aquatic Therapy, see flow sheet x min. Therapeutic Exercises, see flow sheet x min. O Manual Therapy Technique x min.: O Neuro-muscular re-educ, see flow sheet x min.: O Neuro-muscular re-educ, see flow sheet x min.: O HEP issued: