

INC. dba LODI PHYSICAL THERAPY

631 S HAM LANE

LODI, CALIFORNIA 95242

DAILY NOTE

PATIENT'S NAME:

Tiffany Anderson

DATE:

11/11/08

Subjective: pt. has been going on 2 hour walks & → ↑ in swelling & pain @ knee.

Visit #:

7, 8

Objective/Treatment:

Initial Evaluation / Re-evaluation Completed

- E-Stim. To (R) knee Type IFC Setting high Time 15
- 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: (R) knee x 15 min.
- Aquatic Therapy, see flow sheet. x _____ min.
- Therapeutic Exercises, see flow sheet. x 65 min.
- Therapeutic Activities, see flow sheet. x _____ min.
- Manual Therapy Technique x 5 min.: STM & scar mobs @ ant knee
- Neuro-muscular re-educ, see flow sheet x _____ min.:
- HEP issued: cut walking to 3-20 min walks.
- Other, describe: _____
- Case Conference with PTA

Assessment: Had visible swelling at post sights. Pt had no ↓ in pain @ STM. Pt feeling less sore @ loading today than yesterday

Plan:

Progress per treatment plan

Re-evaluate

Discharge

Therapist:

Donna Sankin, PT

RX

10/7/8

8 auth'd

DATE:

11/13/08

Subjective: pt feels a little better since cutting back walking

Visit #:

8, 8

Objective/Treatment:

Initial Evaluation / Re-evaluation Completed

- E-Stim. To (R) knee Type IFC Setting high Time 15
- Ultrasound/Phonophoresis to _____ Cont. / Pulsed _____ % x _____ min. @ _____ W/cm²
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- Hot Pack to: _____ x _____ min.
- Cold Pack to: (R) knee x 15 min.
- Aquatic Therapy, see flow sheet. x _____ min.
- Therapeutic Exercises, see flow sheet. x 65 min.
- Therapeutic Activities, see flow sheet. x 5 min.
- Manual Therapy Technique x _____ min.: STM to (R) scars ant @ ant knee
- Neuro-muscular re-educ, see flow sheet x _____ min.:
- HEP issued: _____
- Other, describe: _____
- Case Conference with PTA

Assessment: pt had had swelling in lateral scar, cont. swelling in medial post-scar.