Physical Therapy Progress Report

PATIENT'S LAST NAME	FIRST NAME			M.I.	GENDER	DATE OF BIRTH		AGE		PATIENT #
MOUSE	MICKEY				Male	1/1/1940		73		2
PAYOR SOURCE		TYPE OF SERV	ICE	(ONSET DATE		SOC DATE		DISC	ONTINUED
Medicare B		PT		·	1/1/2013		3/4/2013			
FACILITY: Therapute LTC					ROOM	1 NUM	BER: 25			
PRIMARY DIAGNOSIS CODE			TREATMENT D.X. / ICD-9 CODE							
Code - Description			Code - Description							
486 - PNEUMONIA ORGANISM UNSP			• 781.2 - ABNORMALITY OF GAIT							

General					
Was therapy frequency provided as ordered?	Patient Response to Treatment This Week				
Yes	Patient has responded well to therapy intervention this treatment period with improved functional mobility skills in all areas. Less VC's needed during transfers and gait. Good recall of safety techniques.				
Other Test Results and/or treatments provided this period:	Method of Assessment for G-code Reporting				
Staff and family instructed on patient status and functional mobility status. Staff educated on proper transfer training techniques with patient.	 G-Code Selection: Mobility: Walking and Moving around Current: CL 60-79% impaired Goal: Cl 1-19% impaired • Standardized Assessment:: Tinetti test performed with patient on this date resulting in a score of 22. Patient with a score of 15 during last Tinetti test. 				

<u>Justification For Continued Treatment</u>					
Continued Skilled Intervention that is Necessary	Additional Justification				
• Determine and implement mobility training techniques • Modify/Advance therapeutic modalities (gait training, strengthening exercises, etc) • Training	Patient making good progress toward established goals and should be able to achieve goals.				
with assistive devices • Safety training • Balance training • Other:: Staff/family education for proper transfer techniques.					

Status of Therapy Goals

Status o	f Short(s)	Time Frame: 4 Weeks			
Description	Baseline Status	Last Note's Status	Current Status		
1. [Met]: Supine to sit min a	max a	max/mod	min a		
2. [Ongoing]: Sit to stand min a	max a		mod A with vc's for proper safety techniques		
3. [Ongoing]: Increase dynamic standing balance to Fair with assistive device	Poor	Poor +	Fair - with assistive device		
4. [Ongoing]: Gait training with rolling walker 150 feet with min a with improved safety and foot clearance		25 feet max/mod a with rolling walker with decreased stride	50 feet mod A with rolling walker with improved stride length. VC's for upright posture and to stay inside walker to decrease risk for falls.		
Status o	f Long(s)	Time Fram	e: 8 Weeks		
Description	Baseline Status	Last Note's Status	Current Status		
1. [Ongoing]: Supine to sit I	max A	max/mod	min a		
2. [Ongoing]: Sit to stand I	max a	max/mod	mod A with vc's for proper safety techniques		
3. [Ongoing]: Increase dynamic standing balance to Good with assistive device	Poor	Poor +	Fair - with assistive device		
 [Ongoing]: Gait training with rolling walker up and down corridor ad lib feet I'ly with Good safety and foot clearance 	10 feet max a with rolling walker with poor safety and foot clearance	25 feet max/mod a with rolling walker with decreased stride	50 feet mod A with rolling walker with improved stride length. VC's for upright posture and to stay inside walker to decrease risk for falls.		

Functional Outcome Skills

FOS			
Roll to Left	Roll to Right		
2=Mod Assist	2=Mod Assist		
Supine to Sit	Sit to Supine		
2=Mod Assist	2=Mod Assist		
Wheel Chair Mobility	Brakes Management		
6=Independ	6=Independ		
Sit to Stand	Stand To Sit		
2=Mod Assist	2=Mod Assist		

Physical Therapy Progress Report

Patient Name: MOUSE, MICKEY

Bed to Wheel Chair	Wheel Chair to Bed
2=Mod Assist	2=Mod Assist
Gait on Stairs	Gait on Level Surfaces
NA	2=Mod Assist
Fall Recovery	Car Transfers
2=Mod Assist	NA

SIGNATURE	DATE	PROF. DESIGNATION
CINDY BROWN	6/5/2013 9:58 AM ET	Therapist (PT)
ADDITIONAL SIGNATURE IF NECESSARY	DATE	PROF. DESIGNATION