

Exam requested by: KEVIN HAGGERTY DC 265 N MAIN ST SPRING VALLEY NY 10977 SITE PERFORMED: LHR ROCKLAND SITE PHONE: (845) 353-0400

Patient: Birth: 03-28-2003 Phone: (201) 470-3594

MRN: 15697015R Acc: 1025670369

Date of Exam: 12-13-2022

EXAM: MRI CERVICAL SPINE WITHOUT CONTRAST

HISTORY: Neck pain status post MVA

TECHNIQUE: Multiplanar, multi-sequential MRI of the cervical spine was obtained on a 1.5T scanner using a standard

protocol.

COMPARISON: None

FINDINGS:

OSSEOUS STRUCTURES: Vertebral body heights are preserved. No marrow edema or destructive marrow infiltrative process.

ALIGNMENT: Straightening of the cervical spine with loss of the normal lordosis. No significant scoliosis. The facet joints are unremarkable. No spondylolisthesis.

SPINAL CORD: Normal signal.

POSTERIOR FOSSA/CERVICOMEDULLARY JUNCTION: Normal.

NECK/PARASPINAL SOFT TISSUES: Unremarkable.

INCLUDED THORACIC SPINE: Unremarkable.

DISCS: No loss in disc height.

The following axial levels are imaged and detailed below:

C2-C3: No disc bulging or hemiation. No spinal canal or foraminal stenosis.

C3-C4: No disc bulging or herniation. No spinal canal or foraminal stenosis.

C4-C5: Mild right foraminal impingement.

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Continued: Page 2 of 2
Patient: Date of Birth: 03-28-2003

C5-C6: No disc bulging or herniation. No spinal canal or foraminal stenosis.

C6-C7: No disc bulging or herniation. No spinal canal or foraminal stenosis.

C7-T1: No disc bulging or herniation. No spinal canal or foraminal stenosis.

IMPRESSION: MRI of the cervical spine demonstrates:

Mild right foraminal impingement at C4-C5.

No acute fracture or dislocation. No marrow edema.

Thank you for the opportunity to participate in the care of this patient.

Steven Klein MD - Electronically Signed: 12-13-2022 2:45 PM Physician to Physician Direct Line is: (845) 213-4992

Confidential

Tel: 212-772-3111 - Fax: 212-734-5832 - www.lenoxhillradiology.com

Advanced Rockland Chiropractic Offices,

Kevin M. Haggerty, D.C. 265 North Main Street, Suite A Spring Valley, New York 10977 P.C.

Telephone (845) 425-6288 Fax (845) 425-1915

Date: 12/2/22

RE: MOSTERED -

D/A: 8/17/22 Acct # NF 2174

DX: (M50.120) (M54.12) (M51.16) (M54.14)

DISABILITY CERTIFICATE

Please be advised that the above named patient is under our care for spinal neuro-muscular traumatology. A course of intensive corrective care and procedures has been instituted. Objective examination findings including biomechanical, orthopedic and neurological testing confirm a significant limitation of function and use of the neuro-musculoskeletal system.

Based on objective limitations and impairments, this patient is disabled and is unable to perform his/her normal work duties safely or effectively at this time.

PERIOD OF DISABILITY

	From: 10/14/22	Until Re-evaluation: 1/13/23
Additional Remarks:_		

Sincerely,

Kevin M Haggerty, DC

✓ Scan

Advanced Rockland Chiropractic Offices, P.C.

Kevin M. Haggerty, DC Spring Valley New York 10977 Telephone (845) 425-6288 Fax (845) 425-1915 265 N Main Street, Suite A

RE-EXAMINATION NARRATIVE

Treatment Plan

NAME:	2101	DATE: 12 2 22 Acct #: 1 217
□Female Male Date of	of Onset: 8 17 22 1	Mode of Injury: ₼MVA □ WC □ Other
SUBJECTIVE COMPLATE Pain Intensity: No Pain Cervical: 0 1 Thoracic: 0 1 Lumbar: 0 1 Sacro-Pelvis: 0 1		Exeruciating 8 9 10 8 9 10 8 9 10 8 9 10 8 9 10
☐ Exacerbation ☐ Re-Injury ☐ Lack of Continuity with of Functional improvement	t noted, however, co-morbidi	ities are delaying healing process
the right orm a	and both shoulded	Back pain with radiation into
has been in Isi	rael for the last	T 21/2 months recieving P.T.
Radicular/Paresthesias: ☐ R ☐ L Upper Extremity ☐ R ☐ L Lower Extremity Present Disability/Impair ☐ Working ☐ Not Working	ty PRIL Buttoc	
Postural Kinesiological Forward Head Posture: Shoulder Level Asymmetry Guarded Gait:	unction: Key: + Tested Abnorm Head Tilt:	☐ Loss Normal Spinal Model: 125 mmetry: 125 — Antalgic Gait: ☐
Muscle Function/Palpable Cervical:	le Spasm: Grade: (1) Mild (2) Mild/M Thoracic:/7 Lun	Moderate (3)Moderate (4)Moderate/Marked (5)Marked (6)Marked/Severe (7) Severe nbar:/7 Sacro/Pelvic:/7
Thoracic: Hypom Lumbar: Hypom Sacral: Hypom	plex Motion Palpation: nobile Joint Function/VSC	☐ Histopathology ☐ Inflammation/Tenderness ☐ Histopathology

Exam Date: /2/2/22

CONTACTOR COALS

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Chiropractic Manipulative Treatmer To correct subluxations, increase pain and support homeostasis. Si Neuromuscular Re-Education: (971) To improve balance, proprioception	joint neuroph tes: Specific (2) on coordinat	ysiological function levels of hypion, posture and	kinesthetic sen	nction/subluxation. se. Including neuro-m	uscular
active release technique and activ	e neuro-musc	ular impulse pro	otocous and posi	urai coordinadon mov	cilicites.
Therapeutic Massage: (97124) Percussion, compression, acupre inflammation and adhesions. Pr	ssure and eff	leurage. Enhand	ce circulation ar	d soft tissue healing.	Reduce
Therapeutic Activities: (97530) Spinal stabilization. Dynamic ac position to improve functional performance of the properties and the properties of the prop	tivities and parformance ar	rotocols to stren d stabilization.	gthen the spine	in its neural and anato	mic
To increase range of motion, stre	ngth, flexibil	ity and enduran	ce function.		
Hot/Cold Pac: (97010)				. •	
To enhance pain reduction, inflat	nmation and	spasm. Promot	e flexibility fund	ction.	
Electrical Muscle Stimulation: (970	14)				
To help reduce pain, spasm and	adhesions.				
Other: ()					
FUNCTIONAL PATIE	NT RESPO				Ţ
ADL Functional Improvements:	Unchanged		Significant Progre	ess Restored	
Self Care/Personal Hygiene:		<u>r</u>			
Sleep Quality/Quantity:		6			
Sitting Duration:		#			
Standing Duration:	П	Ω+ Ω+ Φ)9
Walking Duration:		#		Ō	
Negotiating Stairs:		ont.		Ō	
Driving/Transportation:		pp √afr		0	
Recreation/Social Activities:		7	G		
Concentration:			_		
Objective Functional Improveme	nts: Mild Impr	ovement Impro		Significant Improvement	Restored
Postural Tolerances:			#		
Range of Motion Function:					
Muscle Tonicity Function:		*	(년) 		
Sensory Neurological Function:			oper-		
Reflex Neurological Function:	<u> </u>		- GP - GP		
Motor Strength Function: Proprioceptive Balance Function:			日日出生		

Exam Date: 12/2/22

ADVANCED ROCKLAND CHIROPRACTIC OFFICES, PC

Acct #: NF 2/74

CLINICAL NECESSITY FOR CONTINUED CARE

Re-examination reveals patient's	response to c	are has been:	Favorable		□Unfavorable
Patient has reached pre-accident	functional stat	tus:	6 -No	□ Yes	
A Re-examination is most consisten	t with objecti	ve functional g	ains and a positi	ive patient i	response.
Re-examination demonstrates eff	icacy of treati	ment and suppo	orts continued ca	re.	
The patient continues to exhibit o	bjective func	tional improve	nents, however,	comorbidit	lies are delaying
response to treatment. Delaying	Factors:	over 10 to 1		La	10
☐ Diabetes ☐ Body Habitus	□Deg	conditioned Sy	ndrome #	Interrupted	1 Continuity of Care
	Coss of	cervical	lordosis	multi-	level
□ Diabetes □Body Habitus Complicating Factors/Findings: Translation in Flex	ion Cer	vical Spi	ne. Sku	ill tro	icture.
	TRE	EATMENT PI			
railuRe-Evaluation (99212)	□ CMT 1-2	(98940)	☐ H/C Pacs		
☐ XR-C2 (72040) PC	© €MT 3-4	(98941)	♣-Therapeuti	c Exercise	(97110)
□ XR-C4 (72050) PC	CMT 5	(98942)	☐ Therapeuti	c Activities	s (97010) or (97530)
□ XR-T2 (72070) PC	□ NMR	(97112)			
□ XR-L2 (72100) PC	Massage	(97124)			
□ XR-L4 (72110) PC	□ EMS	(97014) or (G	0283)		
B 111 2 . (1 = = =)					
#Updated Treatment Plan:	☐ 4x/weekly	y 43x/weekl	y □ 2x/weekly	□1x/wee	kly
Duration of Care:	☐ 3-4 weeks	s as outlined in	the MTG	# <u>6</u>	_/weeks
Patient tolerated TX well and TX	was without	incident.			
Consistent with treatment guideling	nes, Patient w	ill be evaluated	l on an ongoing	basis to det	ermine clinical
necessity for MRI Diagnostic Stud	dies.			8	
•					
Remarks: Patient's c objective finding MVA of 8/17/	-	1.7		1 MACE	Lina
Remarks: Palient > C	urrent	CONCILI	ons and	post	1
phiertine finding	s are	causally	related	TO FA	ie
11:11 1 3/11	100				
MYH OF 8/11/	22.				

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111					
Dr. Kevin M. Haggerty	7	Date			

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Scan

Advanced Rockland Chiropractic Offices, PC Acct #: 2174 NF 265 N Main St, Suite A Spring Valley, NY 10977 Date of Service: 12/16/22 DAILY S.O.A.P. NOTES D/A: 8/17/22 ☐ Patient, Dr, Staff all masked. Tx rooms Patient Name sanitized prior to each patient. Masks offered/ Initial Exam: 9/16/22 DX: (1) M50.120 available for all. Covid 19 symptomology/ Re-Exam: 12/2/22 (2) M54.12 possible exposure/vaccination education Ins Co: CHUBB (3) M51.16 Claim #: 092022026731 (4) M54.14 discussed. □Yes deNo Patient Working: Additional Remarks: SUBJECTIVE COMPLAINTS Radicular/Paresthesias: Unbearable Pain Distressing Pain R DL Upper Extremity Pain Intensity: No Pain 10 5 R TE Shoulder/Scapular Cervical: 9 10 8 5 3 2 □R □L Lower Extremity Thoracic: 8 10 5 2 3 1 R L Buttocks/Hip Lumbar: 8 9 10 Sitting Standing Walking Negotiating Stairs Bending Hifting Pulling/Pushing 5 0 1 Sacro-Pelvis: Provocative Activities: Additional Complaints: OBJECTIVE FINDINGS Spasm Grading: (1)Mild (2)Mild/Moderate (3)Moderate (4)Moderate/Marked (5)Marked (6)Marked/Severe (7)Severe Key: + Abnormal Unremarkable Passive ROM / Dynamic Palpation / Chiropractic Manipulation Sites: ☐Tenderness ☐Segmental Dysfunction/VSC -CMT Site High Cervical: ASpasm 4-J Restricted ROM Tenderness Segmental Dysfunction/VSC CMT Site ASpasm 7-5 Restricted ROM Mid Cervical: Tenderness Segmental Dysfunction/VSC CMT Site Spasm 70 Restricted ROM Cerv-thoracic: Tenderness Segmental Dysfunction/VSC A CMT Site Spasm 4-5 ★Restricted ROM Thoracic: Tenderness & Segmental Dysfunction/VSC **★CMT Site** Spasm 4-5 Restricted ROM Thor-lumbar: ☐Tenderness ☐Segmental Dysfunction/VSC J-CMT Site Lumbar: Spasm 7-0 Restricted ROM Lumbo-sacral: Spasm 7-0 Restricted ROM CMT Site Tenderness Segmental Dysfunction/VSC CMT Site Pelvic/SI Joint: Spasm 4-5 Restricted ROM Neg Pos Orthopedic/Provocative Tests: Neg Pos (R) Kemps': П (R) Foraminal Compression: (L) Kemps': (L) Foraminal Compression: (R) Straight Leg Raise: П (R) Shoulder Abduction: (L) Straight Leg Raise: (L) Shoulder Abduction: ASSESSMENT Patient is:

Stabilizing

Progressing as Expected

Overall Improvement

Unchanged

Temporary Worsening Patient states TX affords a degree of improved (MTG A.3): →ADLs □Positional Tolerance Mobility □Strength □Endurance TREATMENT/PLAN □Re-Exam (99212) □Xray: Thera. Ex(97110) — Paraspinal Strengthen/Activation Dynamic Spinal Ext/Stab.

[Isokinetic Exercises CAROM/PROM/Stretching] Therapeutic Exercise Regions: Cervical Thoracic Lumbar □NMR (97112) - □Proprioception/Activation □Positional Release/Balance □Deltoid □Supra/infraspinatus □ITB □Hamstring PPE (99072) TX Frequency: 3 x weekly OPRN OMMI Patient/Released from Care Continue Prescribed TX Plan Doctors Notes: MAT General HNP LS-SI with Left SI neve imprage ment. Cervicul shows (Report) - C4-5 right formand improgenest. Will get The ower cervical, Lumber and

□ Posted

Billed

□ Scan



							oractic Otti				Acct #: 2174 NF
DAILY S.O.A.P. NOTES		A PARTY	26.				g Valley, NY	103//	-	D / CO	
Patient Name:	H,Y	DSEE	•		D/A: 8	3/17/22					ervice: 12/19/12
DX: (1) M50.120	Initi	al Exan	n: 9/16	5/22							asked. Tx rooms
(2) M54.12	Re-I	Exam: 1	2/2/22	2							ient. Masks offered/
(3) M51.16	Ins (Co: CH	UBB								symptomology/
(4) M54.14	Clai	m#: 09	202202	26731			possil	ble exp	osui	e/ vaccinat	tion education
	□Yes	140					discus				
Additional Remarks		4								X	-
				SIIB.	TECTIV	Æ CO	IPLAIN	rs			
Pain Intensity: N	lo Pain	т	Distressir			Inbearat			idicu	lar/Parest	hesias:
		2 3	4 5		7 8		10			Upper Extr	
	0 1	$\frac{1}{2}$ $\frac{1}{3}$	4 5				10			Shoulder/S	
	0 1	2 3 2 3	4 5		_		10	□R	\Box L	Lower Extr	emity
	0 1	2 3	4 5	<u></u> @-	8 (1)	9	10			Buttocks/H	
Provocative Activities:	&Sitti	ng G∕S ta	anding	₩a	lking Ş	?Negoti:	ating Stairs	s ⊈B ei	nding	₽ Lifting	₹ Pulling/Pushing
Additional Complaints:											
-				0	BJECT	IVE FI	NDINGS				
Spasm Grading: (1)Mild (2)Mild/	Moderate ((3)Moderat	e (4)Mod	erate/Ma	rked (5)Ma	arked (6)N	iarked/Severe	(7)Severe	: Key	r: + Abnormal C]Unremarkable
Passive ROM / Dynami	ic Paipa	(11011 / C	ritohi	OM	D.L. Mismily	ondama	cc ESeam	ental D	wefur	action/VSC	dS-CMT Site □
High Cervical: ASpasn	1 7	MIKESU.	icieu N	OM						ection/VSC	€ CMT Site
Mid Cervical: Aspasn											SCMT Site
Cerv-thoracic: Spasn					±1.σ. Ø⊢1.	епаетте	22 A stockiii	ental D	ASIM	ection/VSC	5LCMT Site
Thoracie:		HRestr	icted R	OM	<u>1</u> 20-71.0	enderne	ss Maeam	ental L	ystui	ection/VSC	- '
Thor-lumbar: Aspasn		Restr			4 ∃(1)	enderne	ss process	ental L	ystur	action/VSC	ACMT Site
Lumbar: Spasn										ection/VSC	√E CMT Site
Lumbo-sacral: DSpasn	1 45	Restr	icted R	.OM						nction/VSC	★ CMT Site
Pelvic/SI Joint: DSpasn	1 <u>4</u>	Restr	icted R	MO.	ď∃T	enderne	ss <i>¶</i> ∃Segm	ental D	ysfur	nction/VSC	₽ -CMT Site
Orthopedic/Provocativ	e Tests:	:	Pos	Neg			_			Pos	Neg
(R) Foraminal Compress	sion:		あ			` '	Kemps':			山	
(L) Foraminal Compress	sion:		Æ				Kemps':			Ø \	
(R) Shoulder Abduction:			四			(R)	Straight	Leg R	aise:	Ø	
(L) Shoulder Abduction:			₽-			(L)	Straight 1	Leg Ra	aise:	₽-	
• •					ASS	ESSMI	ENT				
Patient is: Stabilizing	, □Pro	gressing	as Exp	ected	₽⊕ve	rall Imp	rovement	□Unc	hange	ed □Tempo	orary Worsening
F1											
Patient states TX afford	s a degr	ee of im	proved	I (MTC	3 A.3): [REAT	ADLS MENT	□Position /PLAN	al Tole	rance	Mobility	⊔Strength ⊔Endurance
□Re-Exam (99212) □X	Children		ПО	יויוער	20/0	ECMT	(08041)	A Mace	90e-S	nasm Sites (C	7124) DEMS (97014)
#Thera. Ex(97110) #Pa	ray:	Strength	en/Activ	nation (a	⊓Dvnam	ic Spina	Ext/Stab.	∏Isokin	etic E	xercises EA	ROM/PROM/Stretching
Therapeutic Exerc	uaspiliai cise Regi	ons.	Cervic	al	#L	umbar	⊋ Tho	racic		0	
□NMR (97112) - □Propri	oception	/Activati	on $\Box P$	osition	al Releas	se/Balan	ce DDelto	id OSt	ıpra/ir	ıfraspinatus E	IITB □Hamstring
Ø PPE (99072)											
					_						16 0
Continue Prescribed	I TX PI	an	TX Fre	equeno	y: <u>-</u> 2	x weekl	y □PRN		MI Pa	itient/Relea	sed from Care
Doctors Notes:		VD 15-38	ingito ren		. ,	1	26.	. در د مد.		20/ 20	luin conce
Doctors Notes:	CSC	upp	er c	ervi	col	10W	0 110	rucio	a	in flat	yee gases
noted									_		11.
Autorial III											=======================================
				·							magyora es
Patient Tolerated Treatm	nent wel	l: Me s	□ No			/					Dr.

Acct #: 2174 NF

Patient Name: D/A: 8/17/22	Date of Service: 12/23/22
DX: (1) M50.120 Initial Exam: 9/16/22	Patient, Dr, Staff all masked. Tx rooms
(2) M54.12 Re-Exam: 12/2/22	sanitized prior to each patient. Masks offered/
(-)	available for all. Covid 19 symptomology/
(-)	possible exposure/ vaccination education
(1) 2125 1121	discussed.
Patient Working: □Yes #No Additional Remarks:	discussed.
	ar a raymon
SUBJECTIVE COM	
Pain Intensity: No Pain Distressing Pain Unbearable	
Cervical: 0 1 2 3 4 5 6 6 8 9 10	
Thoracic: 0 1 2 3 4 5 6 7 8 9 10 Lumbar: 0 1 2 3 4 5 6 7 8 9 10	*
- CO A A A 10	to be the second about the passers
	ng Stairs FBending FLifting Fulling/Pushing
Additional Complaints: OBJECTIVE FINE	DINGS
Spasm Grading: (1)Mild (2)Mild/Moderate (3)Moderate (4)Moderate/Marked (5)Marked (6)Mar	ked/Severe (7)Severe Key: + Abnormal @Unremarkable
Passive ROM / Dynamic Palpation / Chiropractic Manipulation Sit	tes:
High Cervical: Spasm 4 Restricted ROM Tenderness	Segmental Dysfunction/VSC - Q CMT Site
Mid Cervical: ASpasm 7-5 BRestricted ROM ATenderness	☐Segmental Dysfunction/VSC → CMT Site
Cerv-thoracic: Aspasm 4-5 Restricted ROM STenderness	Segmental Dysfunction/VSC CMT Site
	#Segmental Dysfunction/VSC CMT Site
Thor-lumbar: Despasm 4 Brestricted ROM Strenderness	#\$egmental Dysfunction/VSC
Lumbar:	ASegmental Dysfunction/VSC AS CMT Site
Lumbo-sacral: BSpasm 4-5 BRestricted ROM Tenderness	Segmental Dysfunction/VSC CMT Site
	Segmental Dysfunction/VSC
Pelvic/SI Joint: Posm Pestricted ROM Tenderness Orthopedic/Provocative Tests: Pos Neg	Pos Neg
	Cemps': ₽ □
(t) I ottainmen oomproon	Temps':
(E) I of a final and a series of the series	traight Leg Raise:
(It) Shoulder I to discuss	traight Leg Raise:
(L) Shoulder Abduction: (L) S ASSESSMEN	*
Patient is: Stabilizing Progressing as Expected Voverall Impro	vement □Unchanged □Temporary Worsening
Patient states TX affords a degree of improved (MTG A.3): **ADLs **	Positional Tolerance
TREATMENT/P	LAN
Thera. Ex(97110) — Paraspinal Strengthen/Activation Dynamic Spinal Faraspeutic Exercise Regions: Cervical Grambar NMR (97112) - Proprioception/Activation Positional Release/Balance PRPE (99072)	□Deltoid □Supra/infraspinatus □ITB □Hamstring
Continue Prescribed TX Plan TX Frequency: 2x weekly	
Doctors Notes: Less upper Theracic sport	n noted lodg.
Patient Tolerated Treatment well: Tres O No	Dr Dr A
Scan Posted	Billed
and the second s	

265 N Main St. Suite A Spring Valley, NY 10977

Acct #: 2174 NF

DAILY S.U.A.P. NUTES	203 14 1418	in St, Suite A Spring voncy, Ar		
(-)	1 Exam: 9/16/22 xam: 12/2/22	sanit	Date of Service: 12/24/25 atient, Dr, Staff all masked. Tx rooms ized prior to each patient. Masks offered	
(3) M51.16 Ins C	o: CHUBB	avail	able for all. Covid 19 symptomology/	
1 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	n#: 092022026731	possi	ble exposure/ vaccination education	
Patient Working: DYes T		discu	-	
Additional Remarks:	3110			
Auditional Achiai Ks.				_
Pain Intensity: No Pain	SUB Distressing Pain	JECTIVE COMPLAIN Unbearable Pain	<u> </u>	
Cervical: 0 1 2	* /h	8 9 10	R □L Upper Extremity	
Thoracie: 0 1 2	3 4 5 6	7 8 9 10	R ML Shoulder/Scapular	
Lumbar: 0 1 2	3 4 5 6	7 8 9 10 -6 8 9 10	□R □L Lower Extremity	
Sacro-Pelvis: 0 1 2	2 3 4 5 6 2 3 4 5 6 2 3 4 5 6	7 8 9 10	BR GL Buttocks/Hip	
Dray continue Activities: #Sittin	a Astandina DW:	alking ÆNegotiating Stair	s Bending Elifting Pulling/Pushing	
	g Magning A	iking berogonaming bann	A A T T T T T T T T T T T T T T T T T T	
Additional Complaints:		BJECTIVE FINDINGS		
Space Grading: (L)Mild (2)Mild/Moderate (3)Moderate (4)Moderate/M	arked (5) Marked (6) Marked/Severe	; (7)Severe Key; + Abnormal □Unremarkable	
Passive ROM / Dynamic Palpat	ion / Chiropractic	Manipulation Sites:		
High Cervical: 18 Spasm 4 4	Restricted ROM	DTenderness ASegm	nental Dysfunction/VSC	
High Cervical. [February 115 C.	Dostricted DOM		nental Dysfunction/VSC 15 CMT Site	
Mid Cervical: DSpasm 4-5	ED toleta A DOM		nental Dysfunction/VSC CMT Site	
Cerv-thoracic: Spasm 7.5	ARESTRICTED ROM			
77	Restricted ROM		,	
	Akestricted ROM	-	nental Dysfunction/VSC	
Lumbar:	ARestricted ROM		nental Dysfunction/VSC 15 CMT Site	
Lumbo-sacral: LSpasm 7		⊈ Tenderness ₽ Segm	nental Dysfunction/VSC 5 CMT Site	
Pelvic/SI Joint: 48pasm 4	ARestricted ROM	ATenderness ASegm	nental Dysfunction/VSC	
Orthopedic/Provocative Tests:	Pos Neg	•	Pos Neg	
(R) Foraminal Compression:	Ø ₁ □ ¯	(R) Kemps':	: ♣ □	
(L) Foraminal Compression:		(L) Kemps':	2211.6	
(R) Shoulder Abduction:	8 □		Leg Raise: 🖳 🗆	
• •	# 0	(L) Straight		
(L) Shoulder Abduction:	9 2 L3	ASSESSMENT	Log Raise.	
П		Overall Improvement	□Unchanged □Temporary Worsening	_
Patient states TX affords a degre	e of improved (MT	G A.3): ⊭ADLs □Positior TREATMENT/PLAN	nal Tolerance Mobility □Strength □Enduran	ice
			Wasternam Commission (OTAGA) (DENIES (OTA)	4)
□Re-Exam (99212) □Xray: #Thera. Ex(97110) — Paraspinal S	trengthen/Activation		☐Massage-Spasm Sites (97124) ☐EMS (97014) ☐Isokinetic Exercises ☐AROM/PROM/Stretching	4) {
Therapeutic Exercise Regio	ns: © Cervical	Lumbar #The	id OSupra/infragninatus OITE OHametring	
□NMR (97112) - □Proprioception/A → PPE (99072)	Activation Position	ial Release/Balance LiDelto	oid □Supra/infraspinatus □ITB □Hamstring	
		2		
			☐MMI Patient/Released from Care	
Doctors Notes: Less	ocral spa	in noted		
#				
02 1001/11 000	1	7	Bh =	.
Patient Tolerated Treatment well:	Tes 🗆 No		Dr. <u>////</u>	
Scan		Posted	Billed	
1948 - VIII - ATS TO 194				

Billed

Patient Tolerated Treatment well: A

☐ Scan

DAILY S.O.A.P. NOTES	265 N Main St, Suite A Spring Valley, NY 10977	Acct #: 2174 NF
Patient Name: PECHLYOSE	D/A: 8/17/22	Date of Service: //9/23
		, Staff all masked. Tx rooms
1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		to each patient. Masks offered/
(=)		ll. Covid 19 symptomology/
	992022026731 possible expos	ure/ vaccination education
	discussed.	al or i and a second
Patient Working: Yes No	uistusstu.	-
Additional Remarks:		THE STATE OF THE S
	SUBJECTIVE COMPLAINTS	
Pain Intensity: No Pain	Distressing 1 am	cular/Paresthesias:
Cervical: 0 1 2 3		L Upper Extremity
Thoracic: 0 1 2 3	4 5 6 7 8 9 10 ÆR Æ 4 5 6 7 8 9 10 □R □	E Shoulder/Scapular
Lumbar: 0 1 2 3		L Lower Extremity
Sacro-Pelvis: 0 1 2 3	4 5 6 7 8 9 10 ZR &	E Buttocks/Hip
Provocative Activities:	Standing & Walking & Negotiating Stairs & Bending	ing Orrunning To 1 minus 1 coming
Additional Complaints:	OBJECTIVE FINDINGS	
C Cli (1) Mid (2) Mild Moderate (2) Mode	rate (4)Moderate/Marked (5)Marked (6)Marked/Severe (7)Severe	Cey: + Abnormai □Unremarkable
Passive ROM / Dynamic Palpation /	Chiropractic Manipulation Sites:	•
High Cervical: Spasm 4 BRes	tricted ROM ATendemess Segmental Dyst	function/VSC
The contract of the contract o	tricted ROM ATenderness Segmental Dyst	function/VSC 🚨 CMT Site
7,11	tricted ROM A Tenderness A Segmental Dyst	
	tricted ROM	function/VSC & CMT Site
	tricted ROM	function/VSC
	stricted ROM & Tenderness & Segmental Dyst	function/VSC & CMT Site
	stricted ROM	function/VSC & CMT Site
Sames series 4-12-1	stricted ROM Frenderness & Segmental Dys	
	Pos Neg	Pos Neg
Orthopedic/Provocative Tests:	∠ □ (R) Kemps':	d □
(R) Foraminal Compression:	E (L) Kemps':	6 🗆
(L) Foraminal Compression:	(R) Straight Leg Rais	_
(R) Shoulder Abduction:	(L) Straight Leg Raise	· ·
(L) Shoulder Abduction:	ASSESSMENT	
Detication Ctabilizing Progressi	ng as Expected Overall Improvement Unchar	nged □Temporary Worsening
Datient states TX affords a degree of i	mproved (MTG A.3): DADLs □Positional Tolerar	nce Mobility Strength Endurance
1 attent states 111 attents a 4-8-4-4-	TREATMENT/PLAN	
		S Sites (07124) DEMS (07014)
□Re-Exam (99212) □Xray:	CMT (98940) CMT (98941) Massage	Fyercises #AROM/PROM/Stretching
Thera. Ex(97110) Paraspinal Streng	then/Activation Dynamic Spinal Ext/Stab. Cervical Lumbar Thoracic	5 EVOLOROS CITATORIA LICENSE
I nerapeutic Exercise Regions.	ation Positional Release/Balance Deltoid Supra	a/infraspinatus DITB DHamstring
6 PPE (99072)	ation in contrast to the contr	ŕ
•	2	
& Continue Prescribed TX Plan	TX Frequency: <u>3</u> x weekly □PRN □MMI	Patient/Released from Care
Doctors Notes: /cceping	Lower covical spasm noted.	
		14-14-14
	4000	
علان بالمرازي	- D.V.	Dr. MA
Patient Tolerated Treatment well:		Die 17 /
□ Scan	□ Posted	Billed

□ Scan

Advanced Rockland Chiropractic Offices,

Kevin M. Haggerty, D.C. 265 North Main Street, Suite A Spring Valley, New York 10977

P.C.

Telephone (845) 425-6288 Fax (845) 425-1915

Date: 1/11/22

RE: **CARROLL**D/A: 8/17/22
Acct # NF 2174

DX: (M50.120) (M54.12) (M51.16) (M54.14)

DISABILITY CERTIFICATE

Please be advised that the above named patient is under our care for spinal neuro-muscular traumatology. A course of intensive corrective care and procedures has been instituted. Objective examination findings including biomechanical, orthopedic and neurological testing confirm a significant limitation of function and use of the neuro-musculoskeletal system.

Based on objective limitations and impairments, this patient is disabled and is unable to perform his/her normal work duties safely or effectively at this time.

PERIOD OF DISABILITY

	From: 1/11/23	Unfil Re-evaluation: 1/25/23	
Additional Remarks:			
with.			•
1110X 1110			

Sincerely,

Kevin M Haggerty, DC

] Scan

Billed

□ Scan

DAILY S.O.A.P. NOTES			ite A Spring Va			Acct #: 2174 NF
	Maria.		: 8/17/22		Date of S	ervice: ///6/23
Patient Name. R. 1			8/1//22	N 31.11		asked. Tx rooms
2721 (2) 2122 1122 1	l Exam: 9/16/	22		Z Patient,	Dr, Stan an m	asked. I a roums
(2) 1.25	xam: 12/2/22			sanitized pi	rior to each par	tient. Masks offered/
(-)	o: CHUBB			available to	r all. Covid 19	symptomology/
(1) = 11= 11= 1	n #: 092022026	5731			osure/ vaccina	tion education
Patient Working: □Yes 5	∦ No			discussed.		
Additional Remarks:						
		SUBJECT	IVE COMP	LAINTS		•
Pain Intensity: No Pain	Distressing	Pain	Unbearable I		adicular/Pares	
	2 3 4 5	6/ 7	8 9 10	₽R	□L Upper Ext	remity
	2 3 4 5 2 3 4 5		8 9 10		Shoulder/S	
Lumbar: 0 1 2	2 3 4 5		8 9 10		□L Lower Ext	
Sacro-Pelvis: 0 1 2	2 3 4 5	6 7	8 9 10	J-R	Buttocks/I	tip
Provocative Activities: Sitting	ig &S tanding !	d Walking	☐ Negotiatin	g Stairs & Be	nding &Litting	Tuning/Pushing
Additional Complaints:						
		OBJEC OBJEC	TIVE FIND	INGS od/Severe (7)Sever	Kev: + Abnormal	□Unremarkable
Spasm Grading: (1)Mild (2)Mild/Moderate (3 Passive ROM / Dynamic Palpat)Moderate (4)Moder	ate/Marked (5)	nulation Site	es:	, Koy Honorman	,
High Cervical: Spasm 4	Restricted RC	om 1/	Tenderness	Segmental D	ysfunction/VSC	CMT Site
	Restricted RC				ysfunction/VSC	
	Restricted RC		Tenderness	USegmental D	ysfunction/VSC	CMT Site
			Tenderness	//Segmental I	ysfunction/VSC	CMT Site
	Descripted RC		Tenderness	ASegmental F	Dysfunction/VSC	CMT Site
	Restricted RC		Tenderness	7Segmental F	ysfunction/VSC	,
9			Fenderness	(ISegmental T	ysfunction/VSC	
- Taran Andrews (1997) - 1997 (1997) - 1997 (1997) - 1997 (1997) - 1997 (1997) - 1997 (1997) - 1997 (1997) - 1	Restricted RO)M E	Tandamaga	J.Sogmontal F	ysfunction/VSC	
	Restricted RO		Tendemess	egmentai L	Pos	Neg
Orthopedic/Provocative Tests:	Pos	Neg	(D) V	emps':		
(R) Foraminal Compression:	7		A3 C. a. 3 C. A. C.	emps : emps':	+	
(L) Foraminal Compression:	2			raight Leg R		
(R) Shoulder Abduction:	由					
(L) Shoulder Abduction:	1			raight Leg R	aise.	L
		<u>A3</u>	SSESSMEN'	L oment □IIn/	hanged [Tem	orary Worsening
Patient is: Stabilizing Prog	ressing as Expe	ectea uv	veran miprov	ement don	Manifed Dieni	orary worsoning
Patient states TX affords a degree	e of improved	(MTG A.3): KADLs [i]	Positional Tole	erance Mebility	☐Strength □Endurance
Patient states 1A anoids a dogic	or improved	TRE	ATMENT/P	LAN		
□Re-Exam (99212) □Xray:	- CI	em (000.40)	LONGT (00	OAL STORE	oga-Spacm Sites	(97124) DEMS (97014)
□Re-Exam (99212) □Xray: □Thera. Ex(97110) -□Paraspinal S	Otronathon/Activ	vII (98940)	amic Spinal F	et/Stab Misokii	netic Exercises T A	ROM/PROM/Stretching
Thoronautic Evercice Regio	one. Prervica	1	Lumbar	¶_] I noracic		
□NMR (97112) - □Proprioception/	Activation DPc	sitional Rel	ease/Balance	□Deltoid □S	upra/infraspinatus	□ITB □Hamstring
>PPE (99072)						
			3			
Continue Prescribed TX Pla	an TX Free	quency:	x weekly	□PRN □M	MI Patient/Rele	eased from Care
•						
Doctors Notes: Lessen	ing diti	Ficuli	y note	d risis	ng from s	tring.
The state of the s	1		(
						~
Patient Tolerated Treatment well	I·ANA □ NA					Dr. 914
Lancin Tolerated Treatment wen	1.0m res = 110					

□ Scan

265 N Main St, Suite A Spring Valley, NY 10977

Acct #: 2174 NF

Patient Name. D/A: 8/17/22 Date of Service: //3/23 DX: (1) M50.120 Initial Exam: 9/16/22 Re-Exam: 12/2/22 (3) M51.16 Ins Co: CHUBB Additional Remarks: SUBJECTIVE COMPLAINTS Pain Intensity: No Pain Distressing Pain Unbearable Pain Radicular/Paresthesias: Cervical: 0 1 2 3 4 5 6 7 8 9 10 TR DL Upper Extremity Thoracic: 0 1 2 3 4 5 6 7 8 9 10 TR DL Upper Extremity Thoracic: 0 1 2 3 4 5 6 7 8 9 10 TR DL Lower Extremity Sacro-Pelvis: 0 1 2 3 4 5 6 7 8 9 10 TR DL Lower Extremity Sacro-Pelvis: 0 1 2 3 4 5 6 7 8 9 10 TR DL Lower Extremity Sacro-Pelvis: 0 1 2 3 4 5 6 7 8 9 10 TR DL Lower Extremity Sacro-Pelvis: 0 1 2 3 4 5 6 7 8 9 10 TR DL Lower Extremity Sacro-Pelvis: 0 1 2 3 4 5 6 7 8 9 10 TR DL Lower Extremity Sacro-Pelvis: 0 1 2 3 4 5 6 7 8 9 10 TR DL Lower Extremity Sacro-Pelvis: 0 1 2 3 4 5 6 7 8 9 10 TR DL Lower Extremity Sacro-Pelvis: 0 1 2 3 4 5 6 7 8 9 10 TR DL Lower Extremity Sacro-Pelvis: 0 1 2 3 4 5 6 7 8 9 10 TR DL Lower Extremity Sacro-Pelvis: 0 1 2 3 4 5 6 7 8 9 10 TR DL Lower Extremity Sacro-Pelvis: 0 1 2 3 4 5 6 7 8 9 10 TR DL Lower Extremity Sacro-Pelvis: 0 1 2 3 4 5 6 7 8 9 10 TR DL Lower Extremity Sacro-Pelvis: 0 1 2 3 4 5 6 7 8 9 10 TR DL Lower Extremity Sacro-Pelvis: 0 1 2 3 4 5 6 7 8 9 10 TR DL Lower Extremity Sacro-Pelvis: 0 1 2 3 4 5 6 7 8 9 10 TR DL Lower Extremity Sacro-Pelvis: 0 1 2 3 4 5 6 7 8 9 10 TR DL Lower Extremity Sacro-Pelvis: 0 1 2 3 4 5 6 7 8 9 10 TR DL Lower Extremity Sacro-Pelvis: 0 1 2 3 4 5 6 7 8 9 10 TR DL Lower Extremity Sacro-Pelvis: 0 1 2 3 4 5 6 7 8 9 10 TR DL Lower Extremity Spasm Grading: (1)Mild (2)Mild/Moderate (3)Moderate (4)Moderate/Marked (5)Marked/Severe (7)Severe Key: + Abnormal DUnremarkable Passive ROM / Dynamic Palpation / Chiropractic Manipulation Sites: High Cervical: USpasm 4 DRestricted ROM
(2) M54.12 Re-Exam: 12/2/22 sanitized prior to each patient. Masks offered/ (3) M51.16 Ins Co: CHUBB available for all. Covid 19 symptomology/ (4) M54.14 Claim #: 092022026731 possible exposure/ vaccination education discussed. Additional Remarks: SUBJECTIVE COMPLAINTS Pain Intensity: No Pain Distressing Pain Unbearable Pain Radicular/Paresthesias: Cervical: 0 1 2 3 4 5 6 7 8 9 10 TR DL Upper Extremity Thoracic: 0 1 2 3 4 5 6 7 8 9 10 TR DL Lower Extremity Sacro-Pelvis: 0 1 2 3 4 5 6 7 8 9 10 TR DL Lower Extremity Sacro-Pelvis: 0 1 2 3 4 5 6 7 8 9 10 TR DL Lower Extremity Sacro-Pelvis: 4 Sitting Standing Walking Negotiating Stairs Bending Hifting Pulling/Pushing Additional Complaints: OBJECTIVE FINDINGS Spasm Grading: (1)Mild (2)Mild/Moderate (3)Moderate (4)Moderate/Marked (5)Marked/Severe (7)Severe Key: + Abnormal Dunremarkable Passive ROM / Dynamic Palpation / Chiropractic Manipulation Sites: High Cervical: USpasm 4 Drestricted ROM Tenderness Tegemental Dysfunction/VSC A CMT Site
(2) M54.12 Re-Exam: 12/2/22 sanifized prior to each patient. Masks offered/ (3) M51.16 Ins Co: CHUBB available for all. Covid 19 symptomology/ (4) M54.14 Claim #: 092022026731 possible exposure/ vaccination education discussed. Patient Working:
(3) M51.16 Ins Co: CHUBB (4) M54.14 Claim #: 092022026731 possible exposure/ vaccination education Patient Working: □Yes MO discussed. Additional Remarks: SUBJECTIVE COMPLAINTS Radicular/Paresthesias: Cervical: 0 1 2 3 4 5 6 7 8 9 10
Claim #: 092022026731 possible exposure/ vaccination education discussed.
Patient Working:
Subjective Complaints Subjective Complaints Subjective Complaints Pain Intensity No Pain Distressing Pain Unbearable Pain Radicular/Paresthesias: Cervical:
Pain Intensity: No Pain Distressing Pain Unbearable Pain Radicular/Paresthesias: Cervical: 0 1 2 3 4 5 6 7 8 9 10
Pain Intensity: No Pain Distressing Pain Unbearable Pain Radicular/Paresthesias: Cervical: 0 1 2 3 4 5 7 8 9 10
Cervical: 0 1 2 3 4 5 6 7 8 9 10 Thoracic: 0 1 2 3 4 5 6 7 8 9 10 Lumbar: 0 1 2 3 4 5 6 7 8 9 10 Cervical: 0 2 3 4 5 6 7 8 9 10 Cervical: 0 2 3 4 5 6 7 8 9 10 Cervical: 0 2 3 4 5 6 7 8 9 10 Cervical: 0 2 3 4 5 6 7 8 9 10 Cervical: 0 3 4 5 6 7 8 9 10 Cervical: 0 4 5 6 7 8 9 10 Cervical: 0 5 5 6 7 8 9 10 Cervical: 0 5 6 7 8 9 10 Cervical: 0 5 7 8 9 10 Cervical: 0 5 7 8 9 10 Cervical: 0 5 8 9 10 Cervical: 0 6 7 8 9 10 Cervical: 0 6 7 8 9 10 Cervical: 0 6 7 8 9 10 Cervical: 0 8
Thoracic: 0 1 2 3 4 5 6 7 8 9 10
Thoracic: 0 1 2 3 4 5 6 7 8 9 10 Lumbar: 0 1 2 3 4 5 6 7 8 9 10 R CL Lower Extremity Sacro-Pelvis: 0 1 2 3 4 5 6 7 8 9 10 Restricted ROM DBJECTIVE FINDINGS Spasm Grading: (1)Mild (2)Mild/Moderate (3)Moderate (4)Moderate/Marked (5)Marked (6)Marked/Severe (7)Severe Key: + Abnormal DUnremarkable Passive ROM / Dynamic Palpation / Chiropractic Manipulation Sites: High Cervical: DSpasm 4 DRestricted ROM DT R GL Lower Extremity R DR GL Lower Extremity DR GL Buttocks/Hip Pulling/Pushing OBJECTIVE FINDINGS Spasm Grading: (1)Mild (2)Mild/Moderate (3)Moderate (4)Moderate/Marked (5)Marked (6)Marked/Severe (7)Severe Key: + Abnormal DUnremarkable Passive ROM / Dynamic Palpation / Chiropractic Manipulation Sites: High Cervical: DSpasm 4 DRestricted ROM DT Enderness DSegmental Dysfunction/VSC DCMT Site
Sacro-Pelvis: 0 1 2 3 4 5 6 7 8 9 10
Sacro-Pelvis: 0 1 2 3 4 5 6 7 8 9 10
Provocative Activities: Additional Complaints: OBJECTIVE FINDINGS Spasm Grading: (1)Mild (2)Mild/Moderate (3)Moderate (4)Moderate (5)Marked (5)Marked (6)Marked/Severe (7)Severe Key: + Abnormal OUnremarkable Passive ROM / Dynamic Palpation / Chiropractic Manipulation Sites: High Cervical: USpasm 4
Additional Complaints: OBJECTIVE FINDINGS Spasm Grading: (1)Mild (2)Mild/Moderate (3)Moderate (4)Moderate/Marked (5)Marked (6)Marked/Severe (7)Severe Key: + Abnormal OUnremarkable Passive ROM / Dynamic Palpation / Chiropractic Manipulation Sites: High Cervical: DSpasm 4 DRestricted ROM DTenderness DSegmental Dysfunction/VSC DCMT Site
OBJECTIVE FINDINGS Spasm Grading: (1)Mild (2)Mild/Moderate (3)Moderate (4)Moderate/Marked (5)Marked (6)Marked/Severe (7)Severe Key: + Abnormal □Unremarkable Passive ROM / Dynamic Palpation / Chiropractic Manipulation Sites: High Cervical: □Spasm 4 □Restricted ROM □Tenderness □Segmental Dysfunction/VSC □ CMT Site
Passive ROM / Dynamic Palpation / Chiropractic Manipulation Sites: High Cervical: DSpasm 4 DRestricted ROM DTenderness DSegmental Dysfunction/VSC DCMT Site
High Cervical: DSpasm 4 DRestricted ROM DTenderness DSegmental Dysfunction/VSC DCMT Site
FIGURE CONTRACTOR TO THE CONTRACTOR TO THE TAXABLE
Mid Cervical: #Spasm 4 PRestricted ROM #Tenderness #ISegmental Dysfunction/VSC #CMT Site
Cerv-thoracic: PSpasm 4 Restricted ROM Tenderness Segmental Dysfunction/VSC CMT Site
Thoracic: #Spasm 45 & Restricted ROM #Tenderness #Segmental Dysfunction/VSC #TCMT Site
Thor-lumbar: Spasm 4 Restricted ROM Tenderness Segmental Dysfunction/VSC CMT Site
Lumbar: Spasm 4 Restricted ROM Tenderness Segmental Dysfunction/VSC CMT Site
Lumbo-sacral: Spasm 4 Restricted ROM Tenderness Segmental Dysfunction/VSC CMT Site
TO A STORY THE CONTROL OF CONTROL
Pelvicial John. (papasit / birestricted Restricted Rest
Of the pedical Torontal Toront
(R) Foraminal Compression:
(L) Foraminal Compression:
(K) Shoulder Addition.
(L) Shoulder Abduction.
ASSESSMENT
Patient is: Stabilizing Progressing as Expected Overall Improvement Unchanged Temporary Worsening
Patient states TX affords a degree of improved (MTG A.3): ADLs Positional Tolerance Mobility Strength Endurance
TREATMENT/PLAN
C C' (07124) DEME (07014)
□Re-Exam (99212) □Xray: □CMT (98940) □CMT (98941) ■Massage-Spasm Sites (97124) □EMS (97014) □Thera. Ex(97110) □Paraspinal Strengthen/Activation □Dynamic Spinal Ext/Stab. □Isokinetic Exercises □AROM/PROM/Stretching Therapeutic Exercise Regions: □Cervical □Lumbar □Thoracic □Thoracic □Deltoid □Supra/infraspinatus □ITB □Hamstring
Thera. Ex(97110) Paraspinal Strengthen/Activation Dynamic Spinal Ext/Stab. Disokinetic Exercises Activation Dynamic Spinal Ext/Stab.
Therapeutic Exercise Regions: a Cervical in Elimbar in Find action Therapeutic Exercise Regions: a Cervical in Elimbar in Find action Therapeutic Exercise Regions: a Cervical in Elimbar in Find action Therapeutic Exercise Regions: a Cervical in Elimbar in Find action Therapeutic Exercise Regions: a Cervical in Elimbar in Find action Therapeutic Exercise Regions: a Cervical in Elimbar in Find action Therapeutic Exercise Regions: a Cervical in Elimbar in Find action Therapeutic Exercise Regions: a Cervical in Elimbar in Find action Therapeutic Exercise Regions: a Cervical in Elimbar in Find action Therapeutic Exercise Regions: a Cervical in Elimbar in Find action Therapeutic Exercise Regions: a Cervical in Elimbar in Eli
PPE (99072)
Continue Prescribed TX Plan TX Frequency: 3 x weekly PRN DMMI Patient/Released from Care
Continue Prescribed TX Plan TX Frequency:x weekly \ \preceip PRN \ \ \mathrm{MMI Patient/Released from Care}
1 1 11 2 1 4 1 4 1 4 1 1 1 1 1 1 1 1 1 1
Doctors Notes: LCSS lower thoraic spasm noted Today
Por 7
Patient Tolerated Treatment well: Yes
□ Scan □ Posted □ Billed

Advanced Rockland Chiropractic Offices,

Kevin M. Haggerty, D.C. 265 North Main Street, Suite A Spring Valley, New York 10977 P.C.

Telephone (845) 425-6288 Fax (845) 425-1915

Date: 1/25/23

RE: D/A: 8/17/22 Acct # NF 2174

DX: (M50.120) (M54.12) (M51.16) (M54.14)

DISABILITY CERTIFICATE

Please be advised that the above named patient is under our care for spinal neuro-muscular traumatology. A course of intensive corrective care and procedures has been instituted. Objective examination findings including biomechanical, orthopedic and neurological testing confirm a significant limitation of function and use of the neuro-musculoskeletal system.

Based on objective limitations and impairments, this patient is disabled and is unable to perform his/her normal work duties safely or effectively at this time.

PERIOD OF DISABILITY

	From: 1/25/23	Until Re-evaluation: 2/15/23	
Additional Remarks:			
<u> </u>			
			7

Sincerely,

Kevin M Haggerty, DC

Ф∕Posted

Billed_____

☑ Scan

Patient Tolerated Treatment well: TYes I No

Doctors Notes: Thoracic MAT shows T3-4 TY-5 left posterior hemiotions with canal stenosis. Traction to start for Thoracic

265 N Main St. Suite A. Spring Valley, NY 10977

DAILY S.O.A.P. NOTES	The state of the s	1 St, Suite A Spring valley, IV. 20	Date of Service: 1/27/23			
Patient Name:	The state of the s	D/A: 8/17/22	Date of Service.			
DX; (1) M50.120	Initial Exam: 9/16/22	Pat	ient, Dr, Staff all masked. Tx rooms			
(2) M54.12	Re-Exam: 12/2/22	sanitiz	ed prior to each patient. Masks offered/			
(3) M51.16	Ins Co: CHUBB	availal	ble for all. Covid 19 symptomology/			
(4) M54.14	Claim #: 092022026731		le exposure/ vaccination education			
	Yes WNo	discuss	sed.			
Additional Remarks:						
Additional Kemarks.		PROPERTY COMPLAINTS				
		IECTIVE COMPLAINTS	Radicular/Paresthesias:			
Pain Intensity: No	Pain Distressing Pain	Unbearable Pain 7 8 9 10	dR □L Upper Extremity			
Cervical: 0			ER & Shoulder/Scapular			
Thoracic: 0	1 2 3 4 5 6	7 8 9 10 7 8 9 10	□R □L Lower Extremity			
Lumbar: 0		~ 0 0 10	110- Itt Ruttocks/Hip			
Sacro-Pelvis: 0	1 2 3 4 5 16	Iking Megatiating Stairs	Bending Hifting Pulling/Pushing			
Provocative Activities:	Esitting (Paranding () wa	iking thregoname stans	gazana g			
Additional Complaints:	0	BJECTIVE FINDINGS	pr.			
S C	Anderste (3)Moderate (4)Moderate/Ma	rked (5)Marked (6)Marked/Severe (7)Severe Key: + Abnormal □Unremarkable			
Passive ROM / Dynamic	e Palpation / Chiropractic	Manipulation Sites:	3			
High Cervical: Spasm		L'I enderness L'Segme	ental Dysfunction/VSC			
Mid Cervical: Spasm	(-)	ATenderness ASegme	ental Dysfunction/VSC GCMT Site			
		#Tenderness #Segme	ental Dysfunction/VSC LLCMT Site			
Control of the contro		Tenderness ASegme	ental Dysfunction/VSC CCMT Site			
Thoracic: Spasm		Tenderness Asegme	ental Dysfunction/VSC GCMT Site			
Thor-lumbar: Spasm	 ,	Tenderness Segme	ental Dysfunction/VSC CMT Site			
Lumbar: Spasm		Tonderness degme	ental Dysfunction/VSC CMT Site			
Lumbo-sacral: Aspasm		Tenderness Wisegine	ental Dysfunction/VSC CMT Site			
Pelvic/SI Joint: #Spasm	4-3 Restricted ROM		Pos Neg			
Orthopedic/Provocative						
(R) Foraminal Compressi	ion:	(R) Kemps':				
(L) Foraminal Compressi	ion: 🗗 🗆	(L) Kemps':				
(R) Shoulder Abduction:	P □	(R) Straight I	- 6			
(L) Shoulder Abduction:		(L) Straight I	Leg Raise:			
		ASSESSMENT	DIL 1 1 DTommorow: Worsening			
		•	□Unchanged □Temporary Worsening			
Patient states TX affords	a degree of improved (MT)	G A.3): ∦ ADLs □Positiona TREATMENT/PLAN	al Tolerance ØMobility □Strength □Endurance			
		1	ST. CH. (05104) CIBREC (05014)			
□Re-Exam (99212) □Xr	ay:	98940) CMT (98941)	Massage-Spasm Sites (97124) □EMS (97014) □Isokinetic Exercises □AROM/PROM/Stretching			
Thera. Ex(97110) -Par	aspinal Strengthen/Activation	Dynamic Spinal Ext/Stab. L Lumbar hThor	Isokinetic Exercises JAKOW/F KOW/Stretching			
Therapeutic Exerci	ise Regions: Cervical	Humbar Thor	d □Supra/infraspinatus □ITB □Hamstring			
□NMR (97112) - □Proprio	ception/Activation [] Position	INT VEIGNSCA DATATION CIDCLES	a mountains with a management			
_6	(DX/ D)	TOTAL CIDENT	☐MMI Patient/Released from Care			
Doctors Notes: Less Pelvic/SI spasm noted Todas						
-						
Patient Tolerated Treatme	ent well:		Dr. Dr.			
i√ Scan		Posted	Billed			

265 N Main St, Suite A Spring Valley, NY 10977

Acct #: 2174 NF

Patient Name: STATE OF F	D/A: 8/17/22	Date of Service: 1/3/123
	1/-	Dr, Staff all masked. Tx rooms
1224 (-)	sanitized n	rior to each patient. Masks offered/
(-)	availahle fe	or all. Covid 19 symptomology/
	221 nossible ovi	posure/ vaccination education
(4) M54.14 Claim #: 0920220267	discussed.	Joseph Vaccination cadeanon
Patient Working: Yes No	discussed.	_
Additional Remarks:		
	UBJECTIVE COMPLAINTS	
Pain Intensity: No Pain Distressing 1	4	adicular/Paresthesias:
Cervical: 0 1 2 3 4 5	6 7 8 9 10 PR 7 8 9 10 PR	□L Upper Extremity
	6 7 8 9 10 R	
	© 7 8 9 10 □R	□L Lower Extremity
Sacro-Pelvis: 0 1 2 3 4 5	⑦ 7 8 9 10 €R	Buttocks/Hip
	Walking INegotiating Stairs UBe	nding Lifting Pulling/Pushing
Additional Complaints:	OD TO CONTINUE ENRICHMENT	William To the Control of the Contro
Spasm Grading: (1)Mild (2)Mild/Moderate (3)Moderate (4)Moderate	OBJECTIVE FINDINGS o(Marked (5)Marked (6)Marked/Severe (7)Sever	e Kev: + Abnormal ⊕Unremarkable
Spasm Grading: (1)Mild (2)Mild/Moderate (3)Midderate (4)Moderate (4)Moderate (4)Moderate (4)Moderate (5)Midderate (4)Moderate (5)Midderate (5)Midderate (4)Moderate (5)Midderate (5)Middera	tic Manipulation Sites:	
	M Tenderness ASegmental I	Ovsfunction/VSC D CMT Site
4. 7	0	7
4,	and the contract of the contra	J
	10	J
Thoracic: Spasm 4 Restricted ROI		7
Thor-lumbar: Spasm 4 Restricted ROI	M Tenderness Lesegmental L	And the second
Lumbar: Spasm 9 Restricted ROI		Dysfunction/VSC #CMT Site
Lumbo-sacral: ASpasm 4 Restricted ROI		
Pelvic/SI Joint: Spasm 3-4 Restricted ROI		7
	Neg	Pos Neg
(20) 2 01	(R) Kemps':	F -
(E) I of Linear I I	(L) Kemps':	
(10) 511541441 115444141	(R) Straight Leg R	
(L) Shoulder Abduction:	(L) Straight Leg R	aise:
	ASSESSMENT	han and Tomerovery Worsening
Patient is: □Stabilizing □Progressing as Expec		
Patient states TX affords a degree of improved ()	ATG A.3): #ADLs □Positional Tole TREATMENT/PLAN	erance Mobility Strength Endurance
		O ON COMA O DESECTOROS O
□Re-Exam (99212) □Xray: □CM Thera. Ex(97110) □Paraspinal Strengthen/Activat Therapeutic Exercise Regions: □Cervical □NMR (97112) - □Proprioception/Activation □Posi	r (98940) CMT (98941) Mass	age-Spasm Sites (97124) DEMS (97014)
Thera. Ex(97110) - Paraspinal Strengthen/Activat	ion Dynamic Spinal Ext/Stab. Ulsokii	ietic Exercises #AROM/PROM/Stretching
Therapeutic Exercise Regions: Cervical	tional Release/Balance TDeltoid TS	upra/infraspinatus DITB DHamstring
Continue Prescribed TX Plan TX Frequency	nency: .) x weekly DPRN DM	MI Patient/Released from Care
© Couting Liesemen IV Light IV Liede	oney. on it would be the	
Doctors Notes: Less upper cerys	ical sposm noted	
	•	
		tal. 1
Patient Tolerated Treatment well: Fres No		
⊻ Scan	Posted	Billed

Advanced Rockland Chiropractic Offices,

Kevin M. Haggerty, D.C. 265 North Main Street, Suite A Spring Valley, New York 10977

P.C.

Telephone (845) 425-6288 Fax (845) 425-1915

Date: 2/21/23

RE: VOLUME REIO

D/A: 8/17/22 Acct # NF 2174

DX: (M50.120) (M54.12) (M51.16) (M54.14)

DISABILITY CERTIFICATE

Please be advised that the above named patient is under our care for spinal neuro-muscular traumatology. A course of intensive corrective care and procedures has been instituted. Objective examination findings including biomechanical, orthopedic and neurological testing confirm a significant limitation of function and use of the neuro-musculoskeletal system.

Based on objective limitations and impairments, this patient is disabled and is unable to perform his/her normal work duties safely or effectively at this time.

PERIOD OF DISABILITY

	From: 2/15/23	Until Re-evaluation: 3/13/23	
Additional Remarks:			
and the second second			
	- interpretation		

Sincerely,

Kevin M Haggert

dvanced Rockland Chiropractic Offices,

Acct #: 2174 NF 265 N Main St, Suite A Spring Valley, NY 10977 DAILY S.O.A.P. NOTES Date of Service: 2/2/ D/A: 8/17/22 Patient Name: # Patient, Dr, Staff all masked. Tx rooms Initial Exam: 9/16/22 DX: (1) M50.120 sanitized prior to each patient. Masks offered/ Re-Exam: 12/2/22 (2) M54.12 available for all. Covid 19 symptomology/ Ins Co: CHUBB (3) M51.16 possible exposure/vaccination education Claim #: 092022026731 (4) M54.14 discussed. □Yes 4No Patient Working: Additional Remarks: SUBJECTIVE COMPLAINTS Radicular/Paresthesias: Unbearable Pain Distressing Pain Pain Intensity: No Pain R □L Upper Extremity 10 5 2 - 1 Cervical: FR IL Shoulder/Scapular 9 2 5 8 10 3 4 6 Thoracic: □R □L Lower Extremity 8 9 10 5 2 3 4 6 1 Lumbar: ER HL Buttocks/Hip 9 8 10 5 2 3 4 6 1 0 Sacro-Pelvis: Sitting Standing Walking Negotiating Stairs Bending Lifting Pulling/Pushing Provocative Activities: Additional Complaints: **OBJECTIVE FINDINGS** Spasm Grading: (1)Mild (2)Mild/Moderate (3)Moderate (4)Moderate/Marked (5)Marked (6)Marked/Severe (7)Severe Key: + Abnormal Unremarkable Passive ROM / Dynamic, Palpation / Chiropractic Manipulation Sites: HTenderness ASegmental Dysfunction/VSC E-CMT Site High Cervical: Spasm 3-5 Restricted ROM CMT Site H-Tenderness DSegmental Dysfunction/VSC ☐Restricted ROM Mid Cervical: Spasm 5 Tenderness Segmental Dysfunction/VSC Q CMT Site ☐ Restricted ROM Cerv-thoracic: ASpasm 5 B.Tenderness Segmental Dysfunction/VSC ⊈Spasm <u></u>

5 IJ CMT Site □Restricted ROM Thoracic: ☐ Tenderness ☐ Segmental Dysfunction/VSC **QLCMT** Site Spasm 5 □Restricted ROM Thor-lumbar: Tenderness Segmental Dysfunction/VSC CMT Site BSpasm 5 ☐Restricted ROM Lumbar: ☐ Tenderness ☐ Segmental Dysfunction/VSC Lumbo-sacral: ASpasm **U** CMT Site □Restricted ROM ☐Tenderness ☐Segmental Dysfunction/VSC Br CMT Site Pelvic/SI Joint: 2 Spasm 5 □Restricted ROM Neg Pos Orthopedic/Provocative Tests: Pos Neg (R) Kemps': Z. (R) Foraminal Compression: (L) Kemps': (L) Foraminal Compression: 4 AL. (R) Straight Leg Raise: (R) Shoulder Abduction: B (L) Straight Leg Raise: П (L) Shoulder Abduction: ASSESSMENT Patient is: Stabilizing Progressing as Expected Overall Improvement Unchanged Femporary Worsening Patient states TX affords a degree of improved (MTG A.3): ADLs Positional Tolerance Mobility Strength Endurance TREATMENT/PLAN □CMT (98940) ☐CMT (98941) ☐Massage-Spasm Sites (97124) □EMS (97014) FRe-Exam (99212) □Xray: #Thera. Ex(97110) — Paraspinal Strengthen/Activation Dynamic Spinal Ext/Stab. □Isokinetic Exercises #AROM/PROM/Stretching A-Lumbar #Thoracic Therapeutic Exercise Regions: 4 Cervical □NMR (97112) - □Proprioception/Activation □Positional Release/Balance □Deltoid □Supra/infraspinatus □ITB □Hamstring TX Frequency: 2x weekly OPRN OMMI Patient/Released from Care ☐-Continue Prescribed TX Plan Doctors Notes: Interrupted Treatment due to being out of the for 3 weeks. Thereased Neck and back pain due to the interrupted Treatment. Continued Treatment is medically necessary. Patient Tolerated Treatment well: DYes

No

Advanced Rockland Chiropractic Offices, P.C.

Kevin M. Haggerty, DC Spring Valley New York 10977 Telephone (845) 425-6288 Fax (845) 425-1915 265 N Main Street, Suite A

RE-EXAMINATION NARRATIVE

Treatment Plan

NAME:	1561	7	Ĺ	610	P				2	DATE	2/21/23 Acct #: 2174 NF
	le Da	te of	Ons	et: '	8/1.	7/:	22	Mode	e of I	njury: 🗗 1	MVA WC Other
					- /						
SUBJECTIVE C Pain Intensity:	No Pa		(15:						Ex	cruciating	
Cervical:	0	1	2	3	4 5	6	-0	8			
Thoracic:	ŏ	1	2	3	4 5	6	Ø	8	9	10	
Lumbar:	0	1	2	3 3 3	4 5	6	0	8	9	10	
Sacro-Pelvis:	0	1	2	3	4 5	6	ð	8	9	10	
☐ Patient improvi ☐ Exacerbation ☐ Re-Injury ☐ Lack of Contin				with p	rogre	ssive	func	tiona	l enha	ancement	ė.
☐Functional imp	uity wi	ui ca	otad	how	mer (n-m/	arbid	ities a	are de	elaving hea	aling process
	rks: _	石万	en)	had	1 10	kov	e 1	the	Cou	nTry for	personal reasons. Increased
Radicular/Pares R□L Upper □R□L Lower	Extren	nity		-	HRÆ HRÆ				_	•	mbness/Tingling eakness/Impairment
Present Disabilit ☐ Working ☐ N	y/Impa lot Wo	airm rking	ent: 。团	FTemp	orary	Tota	al Dis	sabili	ty 🗆	Partial Di	sability \Bigcup
			NEU	JRO-	SPIN	AL F	UNO	CTIO	NAI	EXAMI	NATION
Postural Kinesio	logical									resently Univ	
Forward Head Po			d		ead T					Loss	Normal Spinal Model: 🗗
Shoulder Level A		etry:	4	P	elvic l	Level	l Asy	mme	try: 🛭	🖢 Anta	lgic Gait:
Guarded Gait:	J				eg Le						
Muscle Function Cervical: 3	yPalpa /7	ble S	Spas oracio	m: Gr	nde: (1) 1	Mild (2) 7	Mild/i Lui	Moderat mbar:	e (3)Mo	oderate (4)Mode	Sacro/Pelvic:/7
Passive ROM/Jo	int Co	mple	x M	[otion	Palp	ation	ı:				
Upper Cervical:	Hyp	omol	oile J	Joint l	uncti	on/V	SC			mation/Te	
Cervical:	У Нур	omo!	bile .	Joint 1	Functi	ion/V	SC			mation/Te	
Thoracic:	∄ Нур	omo	bile .	Joint :	Functi	ion/V	SC		-	mation/Te	
Lumbar:	∄Нур									mation/Te	
Sacral:	⊞ Нур	omo	bile .	Joint :	Funct	V\aoi	'SC	- 1		mation/Te	
Pelvic:	担Hyp	omo	bile .	Joint :	Funct	ion/V	'SC	山	ıflam	mation/Te	nderness

Exam Date: 2/21	/23 AT	OVANCED ROCKLA	ND CHIROPRACTIC (OFFICES, PC	Act # 2(1/2
Active ROM Functio	n (Arthrodial	Protractor):			
Cervical Flexion:	30	/50° 1	Thoraco-Lumbar I	Elexion:	<u>60</u> _/90°
Cervical Extension:	40	, , , ,	Thoraco-Lumbar I		/ _ _/30°
Cervical R Rotation:	40		Thoraco-Lumbar I		
Cervical L Rotation:	40	_/ 85° 7	Thoraco-Lumbar I	Lateral Flexi	ion: 20 /35°
Cervical R Lateral Fle	xion: /5	_/ 45°			
Cervical L Lateral Fle	xion:	_/ 45°			
Trigger Points/Nocic	eptive Facilit	ation:	· • • •		
#Trapizius #Leva	tor Peri	formis Hamst	rings A Other	(upro) intro	spina Tus
Sensory Neurological	l Function: (P	inwheel-Light To	ouch) Key: + Sens	ory Deficits	Unremarkable
Right Upper Extremity	y: □C5	□C6	M -67	MC8	□T1
Left Upper Extremity:		□C6	₽ C7	□C8	□ T 1
Right Lower Extremit		SHL5	Ø S1		
Left Lower Extremity		□ #£5	6 S1	•	
Hyperesthesias/Sensor	ry Abnormaliti	es:			
Deep Tendon Reflexe	es: Grading: (0)	race (1+)Hypoacti	ve (2+)WNL (3+)N	Mild Hyperactivi	ty (4+) Hyperactive
		(2+) Except w	here noted:	*	
	Biceps	2 Brachiora		Triceps	
	Biceps	2 Brachiora	idialis 🕜	Triceps	
	Patellar	Achilles'			
LLE: <u>1</u>	Patellar	2 ^d Achilles'			
Motor Function/Mus	cle Strength:	All Within Norm	al Limits (5/5) E	xcept where no	ted
Cervico-Thoracic Exte	ension: <u>4</u>		Thoraco Lumbar I	Extension:	<u>9 /</u> 5
(R) Shoulder Abduction	on:		R) Hip Flexors:		<u>5</u> /5
(L) Shoulder Abduction	on: <u> </u>		L) Hip Flexors:		<u>5</u> /5
(R) Wrist Extension:	_5		(R) Leg Extension		5 /5
(L) Wrist Extension:	_4		L) Leg Extension	:	<u>5 /5</u>
(R) Wrist Flexion:			(R) Heel Walk:	-	<u>4</u> /5
(L) Wrist Flexion:			L) Heel Walk:		4 /5 4 /5
(R) Hand Grip:	5		(R) Toe Walk:	-	1 15 15
(L) Hand Grip:	_5	/5	(L) Toe Walk:	.	1 /3
Orthopedic Tests/Sp	inal Nerve Fu	nction: (+) Po	sitive 🛘 Unrema	arkable	
Foraminal Compression	on: Rig	ht ⊯Left	Milgrams:		
Cervical Kemps:	⊭ Rig	ht ALeft	Valsalva:		
Straight Leg Raise:	∄ Rig	ht A -Left	+ cervice	d Pistro	ction
Thoraco-Lumbar Ken			1. Chowle	ver abdue	Tion bilatesally.
Sacro-Iliac Compressi					
Cerebellar/Proprioce			on:	dara:	Name of Timite
Rhombergs:	□Unsteady	□Sway	□Blethrospasm		Normal Limits
One Leg Stand:	□Unsteady	□Sway	Short Duration	-	Normal Limits
Finger to Nose:	□Miss	\Box Unsteady	□Sway	y within	Normal Limits

	75 /	^	190
Exam Date:	2/	21	123
_	./	'	

ADVANCED ROCKLAND CHIROPRACTIC OFFICES, PC

Acct #: 21 74

	TRE	ATMENT GO	ALS		
Chiropractic Manipulative Treatmen To correct subluxations, increase pain and support homeostasis. Si Neuromuscular Re-Education: (971 To improve balance, propriocepti active release technique and active Therapeutic Massage: (97124)	joint neuroph tes: Specific 12) on, coordinat e neuro-musc	ysiological functo levels of hypion, posture and cular impulse pr	omobile joint tun kinesthetic sense otocols and postu	ction/subluxation. Including neuro-n ral coordination mov	nuscular vements.
Percussion, compression, acupre	essure and eff	leurage. Enhan	ce circulation and	soft tissue healing.	Reduce
inflammation and adhesions. Pr	epare patient	for active proto	cols.		
Therapeutic Activities: (97530)					
Spinal stabilization. Dynamic ac	ctivities and p	rotocols to stren	ngthen the spine in	its neural and anato	omic
position to improve functional po	erformance ar	nd stabilization.			
Therapeutic Exercises: (97110)			C		
To increase range of motion, stre	ength, flexibil	ity and enduran	ce function.		
Hot/Cold Pac: (97010)	1	Duamant	a flavibility funct	ion .	
To enhance pain reduction, infla	mmation and	spasm. Promot	e Hexionity funct	Юп.	
Electrical Muscle Stimulation: (970	14)				
To help reduce pain, spasm and	adnesions.				
Other: ()					
FUNCTIONAL PATIE	NT RESPO				N
ADL Functional Improvements:	Unchanged	Steady Progress	Significant Progress	_	
Self Care/Personal Hygiene:					>
Sleep Quality/Quantity:					
Sitting Duration:			0		
Standing Duration:					
Walking Duration:					
Negotiating Stairs:			П		
Driving/Transportation:					
Recreation/Social Activities:	П		IJ		
Concentration:	П		-U	0	
T.,	TerrupT	ed Tona	ImenT		
			ving as Expected Si	ignificant Improvement	Restored
Objective Functional Improveme	nts. Mild impl	ovement impro			
Postural Tolerances:			П		
Range of Motion Function:					
Muscle Tonicity Function: Sensory Neurological Function:					
Reflex Neurological Function:					
Motor Strength Function:					
Proprioceptive Balance Function:					
Propriocentive Balance Function.			_		

Exam Date: 2/21/23

ADVANCED ROCKLAND CHIROPRACTIC OFFICES, PC

Acct #: 2174

CLINICAL NECESSITY FOR CONTINUED CARE

Re-examination reveals patient's	response to care has been:	A Favorable	□ Fair □ Yes	□Unfavorable
Patient has reached pre-accident	functional status:	ß -No		*^^*
Re-examination is most consister	nt with objective functional g	gains and a posit	ive paueni	response.
Re-examination demonstrates eff	icacy of treatment and support	orts continued ca	are.	dan and delegione
The patient continues to exhibit of	bjective functional improve	ments, however	, comorbiai	nes are delaying
response to treatment. Delaying			Testormento	d Continuity of Care
☐ Diabetes ☐ Body Habitus	□Deconditioned Sy	narome 1		Community of Care
Complicating Factors/Findings:	derniated discs 13-4,	14-5 BOIN	1051, WIL	- Canal na ver
CY-5 right forominal imping	gement. 15-31 Nernia	lion with 1	er si	Here Impragence
	TREATMENT PI	LAN		
th Re-Evaluation (99212)	□ CMT 1-2 (98940)	☐ H/C Pacs	(97010)	
□ XR-C2 (72040) PC	CMT 3-4 (98941)	*Therapeut	ic Exercise	(97110)
□ XR-C4 (72050) PC	☐ CMT 5 (98942)	☐ Therapeut	ic Activitie	s (97010) or (97530)
□ XR-T2 (72070) PC	□ NMR (97112)			
□ XR-L2 (72100) PC	☐ Massage (97124)			
□ XR-L4 (72110) PC	₱-EMS (97014) or (0	3 0283)		
Updated Treatment Plan: Duration of Care: Patient tolerated TX well and TX Consistent with treatment guidelinecessity for MRI Diagnostic Stu	nes, Patient will be evaluated	the MTG	0-6	_/ weeks
Remarks: <u>PaTienT'S conf</u> are causally related	Tinued symptoms To the MVA of	and posis	tive obj	ective findings
Mu M Hayer J. Dr. Kevin M. Haggerty	Date 2 1 21	123		

		Ź	ر Ad	vanc	ed Ro	ckland	l Chiro	oprad	ctic Offices	s, Pt	,			
DAILY S.O.A.P. NOTES									alley, NY 109				Acct #: 2174 NF	
Patient Name:	Н, У	CISE			I	D/A:	8/17/3	22	A .			Date of S	-1-6	23
DX: (1) M50.120	Initi	al Exar	n: 9/	16/2	2				Patie	ent, l	Dr, S	taff all ma	sked. Tx rooms	37
(2) M54.12	Re-	Exam: :	2/22/	23					sanitize	d pri	ior to	each pati	ent. Masks offere	Œ/
(3) M51.16	Ins	Co: CH	UBB						availabl	le for	rall.	Covid 19	symptomology/	
(4) M54.14	Clai	m#: 09	92022	.0267	731						osur	e/ vaccinat	tion education	
Patient Working:	□Yes	MNo							discusse	d.				
Additional Remark	s:													
				S	UBJE	CTIV	E CC	OMP	LAINTS					
Pain Intensity:	No Pain		Distres				Inbear		Pain			lar/Parestl		
Cervical:	0 1	2 3	4		66	8	9	10		₽R		Upper Extr	emity	
Thoracic:	0 1	2 3	4	5	6 Ç	8	9	10	•	4		Shoulder/S		
Lumbar:	0 1	2 3	4	5	6 (8	9	10				Lower Extr		
Sacro-Pelvis:	0 1	2 3	4	5	6 C	8 (7	9	10		€K	SIL	Buttocks/H	up - ch-Prilling/Duching	
Provocative Activities:	& Sitt	ing } □S	tandir	ng ∤ E	Walk	cing 🕊	Nego	otiatir	ng Stairs à	Ben	ding	G Liung	(Fulling/Pushing	
Additional Complaints:					OD	TECT	EX TEN E	PUNTO	DINGS					
Spasm Grading: (1)Mild (2)Mild	IN for Jamesta	(3)Moder	oto (4)\	Inders	UB:	ed (5)Ma	arked (6	6)Mark	ced/Severe (7)	Severe	Key	: + Abnormal []Unremarkable	
Passive ROM / Dynam	ic Paln	ation /	Chiro	prac	etic N	lanipi	nano	H OH	es:					
High Cervical: DSpass	m Usi	Rest	ricted	RO	M	ďт	ender	ness,	#Segmen	tal D	ysfun	ction/VSC	CMT Site	
Mid Cervical: Spasi		Rest				AT.	ender	ness	Segmen	tal D	ysfun	ction/VSC	CMT Site	
5/A001		Rest				ZAT.	ender	ness	Segmen	tal D	ysfun	ction/VSC	CMT Site	
		Rest				Ar	ender	ness	A Segmen	tal D	ysfun	ction/VSC	CMT Site	
Thoracic: Spass		Rest				d _T	ender	ness	Segmen	tal D	ysfun	ection/VSC	CMT Site	
U 335		Rest				ΙΕ-Τ	ender	ness	Segmen	tal D	ysfun	ction/VSC	CMT Site	
Lumbar: Spass		Rest				AT	ender	ness	DSegmen.	tal D	ysfur	ection/VSC	CMT Site	
Lumbo-sacral: Spass		Rest				4	énder	ness	Segmen	tal D	ysfur	ection/VSC	CMT Site	
Pelvic/SI Joint: DSpass			Pos		Neg						= 7.:.	Pos	Neg	
Orthopedic/Provocation (R) Foraminal Compression	ecion.	•	H.				(R) K	Cemps':			1		
(L) Foraminal Compres	ssion:		V.						emps':					
(R) Shoulder Abduction			4						traight Le	eg Ra	aise:	1		
			4						traight Le			4		
(L) Shoulder Abduction						ASS	TOOM	MEN	TIP.				æ	
Patient is: □Stabilizin	g APr	ogressin	g as I	Ехре	cted	Ove	rall Ir	npro	vement [Unc	hange	ed □Temp	orary Worsening	
☐	ds a deg	ree of i	mprov	ved (MTG	A.3):	PAD	Ls 🗆	Positional	Tole	rance	e ⊔Mobility	Datrength Dendin	anc
					1	REA	TVLET	VI/P	LAIN					
□D - From (00212) □	Yrow		81	ПСМ	T (98	940)	TICIN	IT (9	8941) A	Mass	age-S	pasm Sites (97124) DEMS (970)14)
□Re-Exam (99212) □X Thera. Ex(97110) □X	Paraspina	1 Strengt	hen/A	ctiva	tion k	Dynan	nic Sp	inal E	Ext/Stab. 🗆	Isokin	etic E	exercises 🗚	ROM/PROM/Stretchi	ng
Therapeutic Exe □NMR (97112) - □Prop	rioceptio	n/Activa	ition	□Pos	sitiona	l Relea	se/Bal	lance	⊔Deltoid	LIS	ıpra/11	niraspinatus	пто плашения	

TX Frequency: 2x weekly DPRN DMMI Patient/Released from Care Continue Prescribed TX Plan cervical sposm noted.

Patient Tolerated Treatment well: Fres D No

✓ Scan

DAILY S.O.A.P. NOTES	265 N M	ain St, Suite A Spring Vall	ey, NY 10977		oct #: 21/4 NF
Patient Name.	TOSEP	D/A: 8/17/22	Ι	Date of Serv	rice: 2 27 23
DX: (1) M50.120 Init	tial Exam: 9/16/22	J	Patient. Dr. St	taff all mask	ed. Tx rooms
222. (2) 2:20 0:20	-Exam: 2/22/23	į	sanitized prior to	each patient	. Masks offered/
(2) 1:15	Co: CHUBB		available for all.	Covid 19 syu	iptomology/
(5) 2125	im #: 09202202673	1	possible exposure	/ vaccination	education
- months - factors	No		discussed.		
Additional Remarks:	Ų				_
Additional	CITY CITY	DIFCTIVE COMPI	AINTS		
70 P T 4 *4		BJECTIVE COMPL unbearable Pa		ar/Paresthes	ias:
Pain Intensity: No Pain	Distressing Pai	A		Upper Extrem	
Cervical: 0 1 Thoracic: 0 1	2 3 4 5 6	4		Shoulder/Scap	
	2 3 4 5 6	8 9 10		Lower Extrem	
	2 2 4 5 6	79 8 9 10	ÆR ÆL	Buttocks/Hip	
Provocative Activities: FSit	ting &Standing LAW	alking #Negotiating	Stairs Bending	&Lifting &	Pulling/Pushing
Additional Complaints:			100		
		OBJECTIVE FINDI	NGS		. deskla
Spasm Grading: (1)Mild (2)Mild/Moderat	e (3)Moderate (4)Moderate/	Marked (5)Marked (6)Marke	d/Severe (7)Severe Key:	+ Abnormal □Um	remarkable
Passive ROM / Dynamic Pal	pation / Chiropracti	c Manipulation Site:	SI		& CMT Site
High Cervical: PSpasm 4.7	Restricted ROM		Segmental Dysfund		E CMT Site
Mid Cervical: RSpasm 4-0	Restricted ROM	Wilenderness E	Segmental Dysfund		E CMT Site
Cerv-thoracie: ESpasm 5	Restricted ROM	M Tenderness U	Segmental Dysfund		E CMT Site
Thoracic: Spasm 5			Segmental Dysfund		CMT Site
Thor-lumbar:			Segmental Dysfund	++-+	
Lumbar: DSpasm 5		☐ Tenderness ☐	Segmental Dysfund		E CMT Site
Lumbo-sacral: \$\P\$Spasm \(\square\)	♣Restricted ROM		Segmental Dysfun	• •	E CMT Site
Pelvic/SI Joint: 45	■Restricted ROM	Tenderness T	Segmental Dysfun		CMT Site
Orthopedic/Provocative Test	ts: Pos No				Neg
(R) Foraminal Compression:	₩ □	(R) Ke	-	•	
(L) Foraminal Compression:	6 □	(L) Ke			
(R) Shoulder Abduction:	₽ □	(R) Str	raight Leg Raise:	•	<u> </u>
(L) Shoulder Abduction:	18 D	The Committee of the Co	aight Leg Raise:	₽	
` '		ASSESSMENT	<u></u>		**** *
Patient is: OStabilizing	rogressing as Expecte	ed Doverall Improve	ement □Unchange	d □Tempora	ry Worsening
Patient states TX affords a de		TC A 21. III ADI a DD	ositional Tolerance	Γ π Mobility □S	trength □Endurance
Patient states TX affords a de	gree of improved (M	TREATMENT/PL	AN	-V	•
□Re-Exam (99212) □Xray:_		(98940) ECMT (989	941) #Massage-Sp	asm Sites (971	24) DEMS (97014)
Thera, Ex(97110) - Paraspin	al Strengthen/Activation	n EDynamic Spinai Ex	UStab. Disokinetic Ex	xercises TARO	W/PKOW/Stretching
	The Common	At implace	AN I DODRICIC		
Therapeutic Exercise Results NMR (97112) - □Proprioception					
Continue Prescribed TX	Dlon TV Exacus	mov. of vweekly r	PRN □MMI Pa	tient/Release	d from Care
Continue Prescribed IX	rian iv Liedne	meg. Avery			
Doctors Notes: Less	Pelinic spaso	noted To	day		
DOCTORS TIONS	The state of the s		0	27.00	
- 111 - 111	- 13V				
					Mz .
					Dr West
Patient Tolerated Treatment w	vell: 🗗 es □ No	J.			DI

Scan

Dr.

□ Scan □ Posted

Patient Tolerated Treatment well: *Yes | No

🗗 Scan

₽ Posted

1 Scan

Acct #: 2174 NF

Billed

□ Posted

□ Scan

265 N Main St, Suite A Spring Valley, NY 10977

Acct #: 2174 NF

Patient Name:	VOLUME.	D/A: 8/17/22	Date of Service: 3/13/23
	itial Exam: 9/16/22		t, Dr, Staff all masked. Tx rooms
	e-Exam: 2/22/23	Vanitized	prior to each patient. Masks offered/
(-)	s Co: CHUBB	available	for all. Covid 19 symptomology/
(-)	laim #: 092022026731	nossible e	xposure/ vaccination education
		discussed.	
Patient Working: DYe	s A INo	discussou.	
Additional Remarks:		COLDY LINES	
	, manual 1	ECTIVE COMPLAINTS	Radicular/Paresthesias:
Pain Intensity: No Pain		Λ O2000000000000000000000000000000000000	
Cervical: 0 1	2 3 4 5 6 -	*	R &L Shoulder/Scapular
Thoracic: 0 1	2 3 4 5 6	7_	R &L Lower Extremity
Lumbar: 0 1 Sacro-Pelvis: 0 1	2 3 4 5 6 2 3 4 5 6		R L Buttocks/Hip
Sacro-Pelvis: 0 1	tting distanding MWa	King (Negotiating Stairs III	Bending Lifting Pulling/Pushing
	und Apranding towa	iking Unregoliating States	Jonaing 12-11-15
Additional Complaints:	Ol	BJECTIVE FINDINGS	
Spasm Grading: (1)Mild (2)Mild/Modera	ate (3)Moderate (4)Moderate/Ma	rked (5)Marked (6)Marked/Severe (7)Sev	were Key: + Abnormal □Unremarkable
Passive ROM / Dynamic Pal	Ipation / Chiropractic	Manipulation Sites:	•
High Cervical: Spasm 4-5	☑ Restricted ROM	Tenderness Segmental	Dysfunction/VSC CMT Site
Mid Cervical: 4Spasm 47	☐ Restricted ROM	Tenderness Segmental	Dysfunction/VSC CMT Site
Cerv-thoracic: Spasm 4-J	Restricted ROM	Tenderness Segmental	Dysfunction/VSC CMT Site
Thoracic: \(\sum_Spasm_s\)		Tenderness Segmenta	Dysfunction/VSC CMT Site
Thor-lumbar: Spasm 4-	Restricted ROM	Tenderness Segmental	Dysfunction/VSC □←CMT Site
Lumbar: Spasm 5		Tenderness Segmenta	Dysfunction/VSC CMT Site
Lumbo-sacral: Spasm 5	Restricted ROM	Tenderness Segmenta	Dysfunction/VSC ☐←CMT Site
Pelvic/SI Joint: Spasm 5-	4 Restricted ROM	Tenderness Segmenta	1 Dysfunction/VSC
Orthopedic/Provocative Tes	sts: Pos Neg		Pos Neg
(R) Foraminal Compression:	\$ □	(R) Kemps':	₽ □
(L) Foraminal Compression:	% □	(L) Kemps':	# □
(R) Shoulder Abduction:		(R) Straight Leg	
(L) Shoulder Abduction:		(L) Straight Leg	Raise: □ □
(D) Shoulder Teams		ASSESSMENT	
Patient is: □Stabilizing □P			Inchanged
Patient states TX affords a de		FREATMENT/PLAN	olerance □Mobility □Strength □Endurance
□Po Evam (99212) □Yrave	□CMT (9	8940) CMT (98941) ME	assage-Spasm Sites (97124) □EMS (97014)
Thera, Ex(97110) Paraspin	nal Strengthen/Activation	Dynamic Spinal Ext/Stab Elso	Assage-Spasm Sites (97124) DEMS (97014) kinetic Exercises AROM/PROM/Stretching
Therapeutic Exercise Re	egions: Dervical	Lumbar Thoracic	
□NMR (97112) - □Propriocepti	ion/Activation □Position	al Release/Balance □Deltoid □	Supra/infraspinatus □ITB □Hamstring
=			MMI Patient/Released from Care
Doctors Notes: Less	sacral Sp	nosm noted I	odg
			0
			-
Patient Tolerated Treatment v	vell∙ ≓ves □ No		D. 172/
ration tolerated freatment v	.еп. В тез п 140		
□ Scan		□ Posted	Billed

Advanced Rockland Chiropractic Offices,

Kevin M. Haggerty, D.C. 265 North Main Street, Suite A Spring Valley, New York 10977

P.C.

Telephone (845) 425-6288 Fax (845) 425-1915

Date: 3/15/23

D/A: 8/17/22 Acct # NF 2174

DX: (M50.120) (M54.12) (M51.16) (M54.14)

DISABILITY CERTIFICATE

Please be advised that the above named patient is under our care for spinal neuro-muscular traumatology. A course of intensive corrective care and procedures has been instituted. Objective examination findings including biomechanical, orthopedic and neurological testing confirm a significant limitation of function and use of the neuro-musculoskeletal system.

Based on objective limitations and impairments, this patient is disabled and is unable to perform his/her normal work duties safely or effectively at this time.

PERIOD OF DISABILITY

	From: 3/15/23	Until Re-evaluation: 4/15/23	
Additional Remarks:			
			-

Sincerely,

Kevin M Haggery DC