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Exam requested by:  
KEVIN HAGGERTY DC  
265 N MAIN ST  
SPRING VALLEY NY 10977

**SITE PERFORMED: LHR ROCKLAND**

**SITE PHONE: (845) 353-0400**

**Patient:** ~~REICH, YOSEF~~  
**Date of 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 herniation. 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: ~~REICH, YOSEF~~

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

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**Confidential**

Tel: 212-772-3111 - Fax: 212-734-5832 - [www.lenoxhillradiology.com](http://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: ~~XXXXXXXXXX~~  
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

## DAILY S.O.A.P. NOTES

Patient Name: **PICHI, YOSE** D/A: 8/17/22  
 DX: (1) M50.120 Initial Exam: 9/16/22  
 (2) M54.12 Re-Exam:  
 (3) M51.16 Ins Co: CHUBB  
 (4) M54.14 Claim #: 092022026731

Date of Service: 12/2/22

☒ Patient, Dr, Staff all masked. Tx rooms  
 sanitized prior to each patient. Masks offered/  
 available for all. Covid 19 symptomology/  
 possible exposure/ vaccination education  
 discussed.

Patient Working: ☐ Yes ☒ No

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 ☒ R ☐ L Upper Extremity  
 Thoracic: 0 1 2 3 4 5 6 7 8 9 10 ☒ R ☒ L Shoulder/Scapular  
 Lumbar: 0 1 2 3 4 5 6 7 8 9 10 ☐ R ☐ L Lower Extremity  
 Sacro-Pelvis: 0 1 2 3 4 5 6 7 8 9 10 ☒ R ☒ L Buttocks/Hip  
 Provocative Activities: ☒ Sitting ☒ Standing ☒ Walking ☒ Negotiating Stairs ☒ Bending ☒ Lifting ☒ Pulling/Pushing  
 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:

High Cervical:	<input checked="" type="checkbox"/> Spasm <u>5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Mid Cervical:	<input checked="" type="checkbox"/> Spasm <u>5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Cerv-thoracic:	<input checked="" type="checkbox"/> Spasm <u>5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Thoracic:	<input checked="" type="checkbox"/> Spasm <u>5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Thor-lumbar:	<input checked="" type="checkbox"/> Spasm <u>5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Lumbar:	<input checked="" type="checkbox"/> Spasm <u>5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Lumbo-sacral:	<input checked="" type="checkbox"/> Spasm <u>5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Pelvic/SI Joint:	<input checked="" type="checkbox"/> Spasm <u>5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site

## Orthopedic/Provocative Tests:

	Pos	Neg		Pos	Neg
(R) Foraminal Compression:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(R) Kemps':	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(L) Foraminal Compression:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(L) Kemps':	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(R) Shoulder Abduction:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(R) Straight Leg Raise:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(L) Shoulder Abduction:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(L) Straight Leg Raise:	<input checked="" type="checkbox"/>	<input type="checkbox"/>

## ASSESSMENT

Patient is: ☐ Stabilizing ☐ Progressing as Expected ☒ Overall Improvement ☐ Unchanged ☐ Temporary WorseningPatient states TX affords a degree of improved (MTG A.3): ☒ ADLs ☐ Positional Tolerance ☒ Mobility ☐ Strength ☐ Endurance

## TREATMENT/PLAN

☒ 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  
☐ NMR (97112) - ☐ Proprioception/Activation ☐ Positional Release/Balance ☐ Deltoid ☐ Supra/infraspinatus ☐ ITB ☐ Hamstring  
☒ PPE (99072)

☒ Continue Prescribed TX Plan TX Frequency: 3 x weekly ☐ PRN ☐ MMI Patient/Released from Care

Doctors Notes: Patient continues to have neck and back pain  
with radiation into the arms and buttocks. He's been in  
Essex for the last 2 1/2 months, receiving PT.

Patient Tolerated Treatment well: ☒ Yes ☐ No☒ Scan☒ Posted

Billed

Dr. Yose

# Advanced Rockland Chiropractic Offices, P.C.

Kevin M. Haggerty, DC

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

## RE-EXAMINATION NARRATIVE

### Treatment Plan

NAME: Yusef Reich DATE: 12/2/22 Acct #: NF 2174

☐ Female ☒ Male Date of Onset: 8/17/22 Mode of Injury: ☒ MVA ☐ WC ☐ Other \_\_\_\_\_

### SUBJECTIVE COMPLAINTS:

**Pain Intensity:** No Pain Excruciating

Cervical:	0	1	2	3	4	5	6	<u>7</u>	8	9	10
Thoracic:	0	1	2	3	4	5	6	<u>7</u>	8	9	10
Lumbar:	0	1	2	3	4	5	6	<u>7</u>	8	9	10
Sacro-Pelvis:	0	1	2	3	4	5	6	<u>7</u>	8	9	10

☒ Patient improving as expected with progressive functional enhancement

☐ Exacerbation

☐ Re-Injury

☒ Lack of Continuity with care

☒ Functional improvement noted, however, co-morbidities are delaying healing process

**Additional Remarks:** Continued neck and back pain with radiation into the right arm and both shoulders and buttocks regions. Patient has been in Israel for the last 2 1/2 months receiving P.T.

### Radicular/Paresthesias:

☒ R ☐ L Upper Extremity

☒ R ☒ L Shoulder/Scapular

☒ Numbness/Tingling

☐ R ☐ L Lower Extremity

☒ R ☒ L Buttocks/Hip

☐ Weakness/Impairment

### Present Disability/Impairment:

☐ Working ☐ Not Working ☒ Temporary Total Disability ☐ Partial Disability

### NEURO-SPINAL FUNCTIONAL EXAMINATION

**Postural Kinesiological Function:** Key: + Tested Abnormal ☐ Presently Unremarkable

Forward Head Posture: ☒ Head Tilt: ☐ Loss Normal Spinal Model: ☒

Shoulder Level Asymmetry: ☒ Pelvic Level Asymmetry: ☒ Antalgic Gait: ☐

Guarded Gait: ☐ Leg Length Asymmetry: ☒

**Muscle Function/Palpable Spasm:** Grade: (1) Mild (2) Mild/Moderate (3) Moderate (4) Moderate/Marked (5) Marked (6) Marked/Severe (7) Severe

Cervical: 5/7 Thoracic: 5/7 Lumbar: 5/7 Sacro/Pelvic: 5/7

### Passive ROM/Joint Complex Motion Palpation:

Upper Cervical: ☒ Hypomobile Joint Function/VSC ☒ Inflammation/Tenderness ☐ Histopathology

Cervical: ☒ Hypomobile Joint Function/VSC ☒ Inflammation/Tenderness ☒ Histopathology

Thoracic: ☒ Hypomobile Joint Function/VSC ☒ Inflammation/Tenderness ☐ Histopathology

Lumbar: ☒ Hypomobile Joint Function/VSC ☒ Inflammation/Tenderness ☒ Histopathology

Sacral: ☒ Hypomobile Joint Function/VSC ☒ Inflammation/Tenderness ☐ Histopathology

Pelvic: ☒ Hypomobile Joint Function/VSC ☒ Inflammation/Tenderness ☐ Histopathology

Exam Date: 12/2/22

ADVANCED ROCKLAND CHIROPRACTIC OFFICES, PC

Acct #: MF 2174**Active ROM Function (Arthrodial Protractor):**

Cervical Flexion: 35 / 50°  
 Cervical Extension: 45 / 70°  
 Cervical R Rotation: 45 / 85°  
 Cervical L Rotation: 75 / 85°  
 Cervical R Lateral Flexion: 20 / 45°  
 Cervical L Lateral Flexion: 20 / 45°

Thoraco-Lumbar Flexion: 60 / 90°  
 Thoraco-Lumbar Extension: 15 / 30°  
 Thoraco-Lumbar R Lateral Flexion: 20 / 35°  
 Thoraco-Lumbar L Lateral Flexion: 20 / 35°

**Trigger Points/Nociceptive Facilitation:**

☒ Trapizius ☒ Levator ☒ Periformis ☒ Hamstrings ☒ Other Supra/infraspinatus

**Sensory Neurological Function: (Pinwheel-Light Touch) Key: + Sensory Deficits Unremarkable**

Right Upper Extremity: ☐ C5 ☐ C6 ☒ C7 ☒ C8 ☐ T1  
 Left Upper Extremity: ☐ C5 ☐ C6 ☒ C7 ☐ C8 ☐ T1  
 Right Lower Extremity: ☐ L4 ☒ L5 ☒ S1  
 Left Lower Extremity: ☐ L4 ☒ L5 ☒ S1

Hyperesthesias/Sensory Abnormalities: \_\_\_\_\_

**Deep Tendon Reflexes: Grading: (0)Trace (1+)Hypoactive (2+)WNL (3+)Mild Hyperactivity (4+) Hyperactive**

All Within Normal Limits (2+) Except where noted:

RUE: 2+ Biceps 2+ Brachioradialis 1+ Triceps  
 LUE: 2+ Biceps 2+ Brachioradialis 2+ Triceps  
 RLE: 2+ Patellar 2+ Achilles'  
 LLE: 2+ Patellar 2+ Achilles'

**Motor Function/Muscle Strength: All Within Normal Limits (5/5) Except where noted**

Cervico-Thoracic Extension: 4 / 5 Thoraco Lumbar Extension: 4 / 5  
 (R) Shoulder Abduction: 5 / 5 (R) Hip Flexors: 5 / 5  
 (L) Shoulder Abduction: 4 / 5 (L) Hip Flexors: 5 / 5  
 (R) Wrist Extension: 5 / 5 (R) Leg Extension: 5 / 5  
 (L) Wrist Extension: 5 / 5 (L) Leg Extension: 5 / 5  
 (R) Wrist Flexion: 5 / 5 (R) Heel Walk: 4 / 5  
 (L) Wrist Flexion: 5 / 5 (L) Heel Walk: 4 / 5  
 (R) Hand Grip: 5 / 5 (R) Toe Walk: 4 / 5  
 (L) Hand Grip: 5 / 5 (L) Toe Walk: 4 / 5

**Orthopedic Tests/Spinal Nerve Function: (+) Positive ☐ Unremarkable**

Foraminal Compression: ☒ Right ☒ Left Milgrams: ☐  
 Cervical Kemps: ☒ Right ☒ Left Valsalva: ☐  
 Straight Leg Raise: ☒ Right ☒ Left  
 Thoraco-Lumbar Kemps: ☒ Right ☒ Left  
 Sacro-Iliac Compression: ☒ Right ☒ Left

**Cerebellar/Proprioceptive Balance/Dysafferentation:**

Rhombergs: ☐ Unsteady ☐ Sway ☐ Blethrospasm ☒ Within Normal Limits  
 One Leg Stand: ☐ Unsteady ☐ Sway ☒ Short Duration ☐ Within Normal Limits  
 Finger to Nose: ☐ Miss ☐ Unsteady ☐ Sway ☒ Within Normal Limits

+ Cervical Distraction  
 + Shoulder abduction bilaterally

Exam Date: 12/2/22

ADVANCED ROCKLAND CHIROPRACTIC OFFICES, PC

Acct #: NF 2174**TREATMENT GOALS****Chiropractic Manipulative Treatment: (98940, 98941, 98942)**

To correct subluxations, increase joint neurophysiological function, enhance proprioceptive function, reduce pain and support homeostasis. Sites: Specific to levels of hypomobile joint function/subluxation.

**Neuromuscular Re-Education: (97112)**

To improve balance, proprioception, coordination, posture and kinesthetic sense. Including neuro-muscular active release technique and active neuro-muscular impulse protocols and postural coordination movements.

**Therapeutic Massage: (97124)**

Percussion, compression, acupressure and effleurage. Enhance circulation and soft tissue healing. Reduce inflammation and adhesions. Prepare patient for active protocols.

**Therapeutic Activities: (97530)**

Spinal stabilization. Dynamic activities and protocols to strengthen the spine in its neural and anatomic position to improve functional performance and stabilization.

**Therapeutic Exercises: (97110)**

To increase range of motion, strength, flexibility and endurance function.

**Hot/Cold Pac: (97010)**

To enhance pain reduction, inflammation and spasm. Promote flexibility function.

**Electrical Muscle Stimulation: (97014)**

To help reduce pain, spasm and adhesions.

**Other: ( )****FUNCTIONAL PATIENT RESPONSE ASSESSMENT SINCE LAST EVALUATION**

<b>ADL Functional Improvements:</b>	<b>Unchanged</b>	<b>Steady Progress</b>	<b>Significant Progress</b>	<b>Restored</b>
Self Care/Personal Hygiene:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sleep Quality/Quantity:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sitting Duration:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Standing Duration:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Walking Duration:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Negotiating Stairs:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Driving/Transportation:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recreation/Social Activities:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Concentration:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<b>Objective Functional Improvements:</b>	<b>Mild Improvement</b>	<b>Improving as Expected</b>	<b>Significant Improvement</b>	<b>Restored</b>
Postural Tolerances:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Range of Motion Function:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Muscle Tonicity Function:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sensory Neurological Function:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reflex Neurological Function:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Motor Strength Function:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Proprioceptive Balance Function:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Exam Date: 12/2/22

ADVANCED ROCKLAND CHIROPRACTIC OFFICES, PC

Acct #: NP2174

**CLINICAL NECESSITY FOR CONTINUED CARE**

- ☒ Re-examination reveals patient's response to care has been: ☒ Favorable ☐ Fair ☐ Unfavorable  
☒ Patient has reached pre-accident functional status: ☒ No ☐ Yes  
☒ Re-examination is most consistent with objective functional gains and a positive patient response.  
☒ Re-examination demonstrates efficacy of treatment and supports continued care.  
☒ The patient continues to exhibit objective functional improvements, however, comorbidities are delaying response to treatment. Delaying Factors:  
☐ Diabetes ☐ Body Habitus ☐ Deconditioned Syndrome ☒ Interrupted Continuity of Care  
☒ Complicating Factors/Findings: Loss of Cervical lordosis multi-level translation in Flexion Cervical spine. Skull fracture.

**TREATMENT PLAN**

- ☒ Re-Evaluation (99212) ☐ CMT 1-2 (98940) ☐ H/C Pacs (97010)  
☐ XR-C2 (72040) PC ☒ CMT 3-4 (98941) ☒ Therapeutic Exercise (97110)  
☐ XR-C4 (72050) PC ☐ CMT 5 (98942) ☐ Therapeutic Activities (97010) or (97530)  
☐ XR-T2 (72070) PC ☐ NMR (97112)  
☐ XR-L2 (72100) PC ☒ Massage (97124)  
☐ XR-L4 (72110) PC ☐ EMS (97014) or (G0283)  
  
☒ Updated Treatment Plan: ☐ 4x/weekly ☒ 3x/weekly ☐ 2x/weekly ☐ 1x/weekly  
Duration of Care: ☐ 3-4 weeks as outlined in the MTG ☒ 6 / weeks  
☒ Patient tolerated TX well and TX was without incident.  
☒ Consistent with treatment guidelines, Patient will be evaluated on an ongoing basis to determine clinical necessity for MRI Diagnostic Studies.

Remarks: Patient's current conditions and positive objective findings are causally related to the MVA of 8/17/22.

Kevin M Haggerty D.C.

Dr. Kevin M. Haggerty

12/2/22

Date



## DAILY S.O.A.P. NOTES

Patient Name: **REICH, YOSEF**

D/A: 8/17/22

Date of Service: **12/6/22**

DX: (1) M50.120

Initial Exam: 9/16/22

☒ Patient, Dr, Staff all masked. Tx rooms  
sanitized prior to each patient. Masks offered/  
available for all. Covid 19 symptomology/  
possible exposure/ vaccination education  
discussed.

(2) M54.12

Re-Exam: 12/2/22

(3) M51.16

Ins Co: CHUBB

(4) M54.14

Claim #: 092022026731

Patient Working: ☐ Yes ☒ No

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	<input checked="" type="checkbox"/> R <input type="checkbox"/> L	Upper Extremity
Thoracic:	0	1	2	3	4	5	6	7	8	9	10	<input checked="" type="checkbox"/> R <input checked="" type="checkbox"/> L	Shoulder/Scapular
Lumbar:	0	1	2	3	4	5	6	7	8	9	10	<input type="checkbox"/> R <input type="checkbox"/> L	Lower Extremity
Sacro-Pelvis:	0	1	2	3	4	5	6	7	8	9	10	<input checked="" type="checkbox"/> R <input checked="" type="checkbox"/> L	Buttocks/Hip

Provocative Activities: ☒ Sitting ☒ Standing ☒ Walking ☒ Negotiating Stairs ☒ Bending ☒ Lifting ☒ Pulling/Pushing

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:**

High Cervical:	<input checked="" type="checkbox"/> Spasm <b>5</b>	<input checked="" type="checkbox"/> Restricted ROM	<input type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Mid Cervical:	<input checked="" type="checkbox"/> Spasm <b>5</b>	<input checked="" type="checkbox"/> Restricted ROM	<input type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Cerv-thoracic:	<input checked="" type="checkbox"/> Spasm <b>5</b>	<input checked="" type="checkbox"/> Restricted ROM	<input type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Thoracic:	<input checked="" type="checkbox"/> Spasm <b>5</b>	<input checked="" type="checkbox"/> Restricted ROM	<input type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Thor-lumbar:	<input checked="" type="checkbox"/> Spasm <b>4-5</b>	<input checked="" type="checkbox"/> Restricted ROM	<input type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Lumbar:	<input checked="" type="checkbox"/> Spasm <b>5</b>	<input checked="" type="checkbox"/> Restricted ROM	<input type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Lumbo-sacral:	<input checked="" type="checkbox"/> Spasm <b>5</b>	<input checked="" type="checkbox"/> Restricted ROM	<input type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Pelvic/SI Joint:	<input checked="" type="checkbox"/> Spasm <b>5</b>	<input checked="" type="checkbox"/> Restricted ROM	<input type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site

**Orthopedic/Provocative Tests:**

Pos Neg

(R) Foraminal Compression:

☒ ☐

(R) Kemps':

Pos Neg

☒ ☐

(L) Foraminal Compression:

☒ ☐

(L) Kemps':

☒ ☐

(R) Shoulder Abduction:

☒ ☐

(R) Straight Leg Raise:

☒ ☐

(L) Shoulder Abduction:

☒ ☐

(L) Straight Leg Raise:

☒ ☐**ASSESSMENT**Patient is: ☐ Stabilizing ☐ Progressing as Expected ☒ Overall Improvement ☐ Unchanged ☐ Temporary WorseningPatient states TX affords a degree of improved (MTG A.3): ☒ ADLs ☐ Positional Tolerance ☒ Mobility ☐ Strength ☐ Endurance**TREATMENT/PLAN**☐ 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/StretchingTherapeutic Exercise Regions: ☒ Cervical ☒ Lumbar ☒ Thoracic☐ NMR (97112) - ☐ Proprioception/Activation ☐ Positional Release/Balance ☐ Deltoid ☐ Supra/infraspinatus ☐ ITB ☐ Hamstring☒ PPE (99072)☒ Continue Prescribed TX Plan TX Frequency: **3** x weekly ☐ PRN ☐ MMI Patient/Released from CareDoctors Notes: Lessening Lower Thoracic spasm noted.Patient Tolerated Treatment well: ☒ Yes ☐ NoDr. MJL☐ Scan☐ Posted

Billed \_\_\_\_\_

## DAILY S.O.A.P. NOTES

Patient Name: FEICH, YOSEF

D/A: 8/17/22

Date of Service: 12/9/22

DX: (1) M50.120

Initial Exam: 9/16/22

☒ Patient, Dr, Staff all masked. Tx rooms  
sanitized prior to each patient. Masks offered/  
available for all. Covid 19 symptomology/  
possible exposure/ vaccination education  
discussed.

(2) M54.12

Re-Exam: 12/2/22

(3) M51.16

Ins Co: CHUBB

(4) M54.14

Claim #: 092022026731

Patient Working: ☐ Yes ☒ No

Additional Remarks: \_\_\_\_\_

## SUBJECTIVE COMPLAINTS

## Pain Intensity :

No Pain

Distressing Pain

Unbearable Pain

## Radicular/Paresthesias:

Cervical:	0	1	2	3	4	5	6	0	8	9	10	<input checked="" type="checkbox"/> R <input type="checkbox"/> L	Upper Extremity
Thoracic:	0	1	2	3	4	5	6	0	8	9	10	<input checked="" type="checkbox"/> R <input checked="" type="checkbox"/> L	Shoulder/Scapular
Lumbar:	0	1	2	3	4	5	6	0	8	9	10	<input type="checkbox"/> R <input type="checkbox"/> L	Lower Extremity
Sacro-Pelvis:	0	1	2	3	4	5	6	0	8	9	10	<input checked="" type="checkbox"/> R <input checked="" type="checkbox"/> L	Buttocks/Hip

Provocative Activities: ☒ Sitting ☒ Standing ☒ Walking ☐ Negotiating Stairs ☒ Bending ☐ Lifting ☐ Pulling/Pushing

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:

High Cervical:	<input checked="" type="checkbox"/> Spasm <u>4/5</u>	<input type="checkbox"/> Restricted ROM	<input type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Mid Cervical:	<input checked="" type="checkbox"/> Spasm <u>5</u>	<input type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input type="checkbox"/> CMT Site
Cerv-thoracic:	<input checked="" type="checkbox"/> Spasm <u>5</u>	<input type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input type="checkbox"/> CMT Site
Thoracic:	<input checked="" type="checkbox"/> Spasm <u>4/5</u>	<input type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Thor-lumbar:	<input checked="" type="checkbox"/> Spasm <u>4/5</u>	<input type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Lumbar:	<input checked="" type="checkbox"/> Spasm <u>5</u>	<input type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input type="checkbox"/> CMT Site
Lumbo-sacral:	<input checked="" type="checkbox"/> Spasm <u>5</u>	<input type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Pelvic/SI Joint:	<input checked="" type="checkbox"/> Spasm <u>4/5</u>	<input type="checkbox"/> Restricted ROM	<input type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site

## Orthopedic/Provocative Tests:

Pos Neg

(R) Foraminal Compression:

☒☐

(R) Kemps':

☒☐

(L) Foraminal Compression:

☒☐

(L) Kemps':

☒☐

(R) Shoulder Abduction:

☒☐

(R) Straight Leg Raise:

☒☐

(L) Shoulder Abduction:

☒☐

(L) Straight Leg Raise:

☒☐

## ASSESSMENT

Patient is: ☐ Stabilizing ☐ Progressing as Expected ☒ Overall Improvement ☐ Unchanged ☐ Temporary WorseningPatient states TX affords a degree of improved (MTG A.3): ☒ ADLs ☐ Positional Tolerance ☒ Mobility ☐ Strength ☐ Endurance

## TREATMENT/PLAN

☐ 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

☐ NMR (97112) - ☐ Proprioception/Activation ☐ Positional Release/Balance ☐ Deltoid ☐ Supra/infraspinatus ☐ ITB ☐ Hamstring

☒ PPE (99072)

☒ Continue Prescribed TX Plan TX Frequency: 3 x weekly ☐ PRN ☐ MMI Patient/Released from Care

Doctors Notes:

Lessening upper cervical, Thoracic, lower thoracic and  
SI pain and spasm noted today

Patient Tolerated Treatment well: ☒ Yes ☐ No☐ Scan☐ Posted

Billed \_\_\_\_\_

Dr. MS

Patient Name: DECHY, YOSIE

D/A: 8/17/22

Date of Service: 12/12/22

DX: (1) M50.120

Initial Exam: 9/16/22

☒ Patient, Dr, Staff all masked. Tx rooms  
sanitized prior to each patient. Masks offered/  
available for all. Covid 19 symptomology/  
possible exposure/ vaccination education  
discussed.

(2) M54.12

Re-Exam: 12/2/22

(3) M51.16

Ins Co: CHUBB

(4) M54.14

Claim #: 092022026731

Patient Working: ☐ Yes ☒ No

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

Thoracic:

0 1 2 3 4 5 6 7 8 9 10

Lumbar:

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: ☒ Sitting ☒ Standing ☒ Walking ☒ Negotiating Stairs ☒ Bending ☐ Lifting ☐ Pulling/Pushing

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:**

High Cervical:	<input checked="" type="checkbox"/> Spasm <u>4-5</u>	<input type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Mid Cervical:	<input checked="" type="checkbox"/> Spasm <u>4-5</u>	<input type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Cerv-thoracic:	<input checked="" type="checkbox"/> Spasm <u>5</u>	<input type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Thoracic:	<input checked="" type="checkbox"/> Spasm <u>4-5</u>	<input type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Thor-lumbar:	<input checked="" type="checkbox"/> Spasm <u>4-5</u>	<input type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Lumbar:	<input checked="" type="checkbox"/> Spasm <u>5</u>	<input type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Lumbo-sacral:	<input checked="" type="checkbox"/> Spasm <u>5</u>	<input type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Pelvic/SI Joint:	<input checked="" type="checkbox"/> Spasm <u>4-5</u>	<input type="checkbox"/> Restricted ROM	<input type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site

**Orthopedic/Provocative Tests:**

Pos

Neg

R) Foraminal Compression:

☒☐

(R) Kemps':

Pos

Neg

☒☐

L) Foraminal Compression:

☒☐

(L) Kemps':

☒☐

R) Shoulder Abduction:

☒☐

(R) Straight Leg Raise:

☒☐

L) Shoulder Abduction:

☒☐

(L) Straight Leg Raise:

☒☐**ASSESSMENT**Patient is: ☐ Stabilizing ☐ Progressing as Expected ☒ Overall Improvement ☐ Unchanged ☐ Temporary WorseningPatient states TX affords a degree of improved (MTG A.3): ☒ ADLs ☐ Positional Tolerance ☒ Mobility ☐ Strength ☐ Endurance**TREATMENT/PLAN**☒ 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/StretchingTherapeutic Exercise Regions: ☒ Cervical☒ Lumbar☒ Thoracic☒ NMR (97112) - ☐ Proprioception/Activation ☐ Positional Release/Balance ☐ Deltoid ☐ Supra/infraspinatus ☐ ITB ☐ Hamstring☒ PPE (99072)☒ Continue Prescribed TX Plan TX Frequency: 3 x weekly ☐ PRN ☐ MMI Patient/Released from CareDoctors Notes: Lessening mid cervical spasm noted todayPatient Tolerated Treatment well: ☒ Yes ☐ NoDr. DA☐ Scan☐ Posted

Billed \_\_\_\_\_

DAILY S.O.A.P. NOTES

D/A: 8/17/22

Date of Service: 12/16/22

Patient Name: REICH, YOSEF  
DX: (1) M50.120 Initial Exam: 9/16/22  
(2) M54.12 Re-Exam: 12/2/22  
(3) M51.16 Ins Co: CHUBB  
(4) M54.14 Claim #: 092022026731

☐ Patient, Dr, Staff all masked. Tx rooms  
sanitized prior to each patient. Masks offered/  
available for all. Covid 19 symptomology/  
possible exposure/ vaccination education  
discussed.

Patient Working: ☐ Yes ☒ No

Additional Remarks:

SUBJECTIVE COMPLAINTS

**Pain Intensity :**

	No Pain	Distressing Pain	Unbearable Pain
Cervical:	0 1 2 3 4 5	6-7 8 9 10	8 9 10
Thoracic:	0 1 2 3 4 5	6-7 8 9 10	8 9 10
Lumbar:	0 1 2 3 4 5	6-7 8 9 10	8 9 10
Sacro-Pelvis:	0 1 2 3 4 5	6-7 8 9 10	8 9 10

Provocative Activities: ☒ Sitting ☒ Standing ☒ Walking ☒ Negotiating Stairs ☒ Bending ☒ Lifting ☒ Pulling/Pushing

Additional Complaints:

Radicular/Paresthesias:

☒ R ☐ L Upper Extremity  
☒ R ☒ L Shoulder/Scapular  
☐ R ☐ L Lower Extremity  
☒ R ☒ L Buttocks/Hip  
☒ Bending ☒ Lifting ☒ 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 ☐ Unremarkable

Passive ROM / Dynamic Palpation / Chiropractic Manipulation Sites:

	Spasm	ROM	Tenderness	Segmental Dysfunction/VSC	CMT Site
High Cervical:	4-5	Restricted ROM	+	+	+
Mid Cervical:	4-5	Restricted ROM	+	+	+
Cerv-thoracic:	4-5	Restricted ROM	+	+	+
Thoracic:	4-5	Restricted ROM	+	+	+
Thor-lumbar:	4-5	Restricted ROM	+	+	+
Lumbar:	4-5	Restricted ROM	+	+	+
Lumbo-sacral:	4-5	Restricted ROM	+	+	+
Pelvic/SI Joint:	4-5	Restricted ROM	+	+	+

Orthopedic/Provocative Tests:

	Pos	Neg
(R) Foraminal Compression:	+	<input type="checkbox"/>
(L) Foraminal Compression:	+	<input type="checkbox"/>
(R) Shoulder Abduction:	+	<input type="checkbox"/>
(L) Shoulder Abduction:	+	<input type="checkbox"/>

(R) Kemps': ☒ Pos ☐ Neg  
(L) Kemps': ☒ Pos ☐ Neg  
(R) Straight Leg Raise: ☒ Pos ☐ Neg  
(L) Straight Leg Raise: ☒ Pos ☐ Neg

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: ☐ 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  
☐ NMR (97112) - ☐ Proprioception/Activation ☐ Positional Release/Balance ☐ Deltoid ☐ Supra/infraspinatus ☐ ITB ☐ Hamstring  
☒ PPE (99072)

☒ Continue Prescribed TX Plan TX Frequency: 3 x weekly ☐ PRN ☐ MMI Patient/Released from Care

Doctors Notes: MRI Lumbar HNP L5-S1 with left S1 nerve impingement.  
Cervical shows (report) - C4-5 right foraminal impingement. Will get the  
films and review.  
less lower cervical, Lumbar and Sacral spasm noted tomorrow

Patient Tolerated Treatment well: ☒ Yes ☐ No

Dr. MH

☐ Scan

☐ Posted

Billed \_\_\_\_\_

## DAILY S.O.A.P. NOTES

Patient Name: **REICH, YOSEF**

D/A: 8/17/22

Date of Service: 12/19/22

DX: (1) M50.120 Initial Exam: 9/16/22  
 (2) M54.12 Re-Exam: 12/2/22  
 (3) M51.16 Ins Co: CHUBB  
 (4) M54.14 Claim #: 092022026731

Patient Working: ☐ Yes ☒ No

**\* Patient, Dr, Staff all masked. Tx rooms  
 sanitized prior to each patient. Masks offered/  
 available for all. Covid 19 symptomology/  
 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	<input checked="" type="checkbox"/> R <input type="checkbox"/> L Upper Extremity
Thoracic:	0	1	2	3	4	5	6	7	8	9	10	<input checked="" type="checkbox"/> R <input checked="" type="checkbox"/> L Shoulder/Scapular
Lumbar:	0	1	2	3	4	5	6	7	8	9	10	<input type="checkbox"/> R <input type="checkbox"/> L Lower Extremity
Sacro-Pelvis:	0	1	2	3	4	5	6	7	8	9	10	<input checked="" type="checkbox"/> R <input checked="" type="checkbox"/> L Buttocks/Hip

Provocative Activities: ☒ Sitting ☒ Standing ☒ Walking ☒ Negotiating Stairs ☒ Bending ☒ Lifting ☒ Pulling/Pushing

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:**

High Cervical:	<input checked="" type="checkbox"/> Spasm <u>4</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Mid Cervical:	<input checked="" type="checkbox"/> Spasm <u>4-5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Cerv-thoracic:	<input checked="" type="checkbox"/> Spasm <u>4-5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Thoracic:	<input checked="" type="checkbox"/> Spasm <u>4-5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Thor-lumbar:	<input checked="" type="checkbox"/> Spasm <u>4</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Lumbar:	<input checked="" type="checkbox"/> Spasm <u>4-5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Lumbo-sacral:	<input checked="" type="checkbox"/> Spasm <u>4-5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Pelvic/SI Joint:	<input checked="" type="checkbox"/> Spasm <u>4</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site

**Orthopedic/Provocative Tests:** Pos Neg

(R) Foraminal Compression:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(R) Kemps':	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(L) Foraminal Compression:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(L) Kemps':	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(R) Shoulder Abduction:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(R) Straight Leg Raise:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(L) Shoulder Abduction:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(L) Straight Leg Raise:	<input checked="" type="checkbox"/>	<input type="checkbox"/>

**ASSESSMENT**Patient is: ☐ Stabilizing ☐ Progressing as Expected ☒ Overall Improvement ☐ Unchanged ☐ Temporary WorseningPatient states TX affords a degree of improved (MTG A.3): ☒ ADLs ☐ Positional Tolerance ☒ Mobility ☐ Strength ☐ Endurance**TREATMENT/PLAN**

☐ 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  
☐ NMR (97112) - ☐ Proprioception/Activation ☐ Positional Release/Balance ☐ Deltoid ☐ Supra/infraspinatus ☐ ITB ☐ Hamstring  
☒ PPE (99072)

Continue Prescribed TX Plan TX Frequency: 2 x weekly ☐ PRN ☐ MMI Patient/Released from CareDoctors Notes: less upper cervical, lower thoracic and pelvic spasm noted.Patient Tolerated Treatment well: ☒ Yes ☐ No☒ Scan☒ Posted

Billed \_\_\_\_\_

Dr. MA



## DAILY S.O.A.P. NOTES

Patient Name: REICHL, YOSIE

D/A: 8/17/22

Date of Service: 12/29/22

DX: (1) M50.120

Initial Exam: 9/16/22

☒ Patient, Dr, Staff all masked. Tx rooms  
sanitized prior to each patient. Masks offered/  
available for all. Covid 19 symptomology/  
possible exposure/ vaccination education  
discussed.

(2) M54.12

Re-Exam: 12/2/22

(3) M51.16

Ins Co: CHUBB

(4) M54.14

Claim #: 092022026731

Patient Working: ☐ Yes ☒ No

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	<input checked="" type="checkbox"/> R <input type="checkbox"/> L	Upper Extremity
Thoracic:	0	1	2	3	4	5	6	7	8	9	10	<input checked="" type="checkbox"/> R <input checked="" type="checkbox"/> L	Shoulder/Scapular
Lumbar:	0	1	2	3	4	5	6	7	8	9	10	<input type="checkbox"/> R <input type="checkbox"/> L	Lower Extremity
Sacro-Pelvis:	0	1	2	3	4	5	6	7	8	9	10	<input checked="" type="checkbox"/> R <input checked="" type="checkbox"/> L	Buttocks/Hip

Provocative Activities: ☒ Sitting ☒ Standing ☒ Walking ☒ Negotiating Stairs ☒ Bending ☒ Lifting ☒ Pulling/Pushing

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:

High Cervical:	<input checked="" type="checkbox"/> Spasm <u>4</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Mid Cervical:	<input checked="" type="checkbox"/> Spasm <u>4-5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Cerv-thoracic:	<input checked="" type="checkbox"/> Spasm <u>4-5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Thoracic:	<input checked="" type="checkbox"/> Spasm <u>4</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Thor-lumbar:	<input checked="" type="checkbox"/> Spasm <u>4</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Lumbar:	<input checked="" type="checkbox"/> Spasm <u>4-5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Lumbo-sacral:	<input checked="" type="checkbox"/> Spasm <u>4-5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Pelvic/SI Joint:	<input checked="" type="checkbox"/> Spasm <u>4</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site

## Orthopedic/Provocative Tests:

Pos Neg

(R) Foraminal Compression:

☒ ☐

(R) Kemps':

☒ ☐

(L) Foraminal Compression:

☒ ☐

(L) Kemps':

☒ ☐

(R) Shoulder Abduction:

☒ ☐

(R) Straight Leg Raise:

☒ ☐

(L) Shoulder Abduction:

☒ ☐

(L) Straight Leg Raise:

☒ ☐

## 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: \_\_\_\_\_ ☐ CMT (98940) ☒ CMT (98941) ☐ Massage-Spasm Sites (97124) ☐ EMS (97014)

☒ Thera. Ex(97110) - ☒ Paraspinal Strengthen/Activation ☒ Dynamic Spinal Ext/Stab. ☐ Isokinetic Exercises ☒ PROM/STRETCHING

Therapeutic Exercise Regions: ☒ Cervical ☒ Lumbar ☒ Thoracic

☐ NMR (97112) - ☐ Proprioception/Activation ☐ Positional Release/Balance ☐ Deltoid ☐ Supra/infraspinatus ☐ ITB ☐ Hamstring

☒ RPE (99072)

☒ Continue Prescribed TX Plan TX Frequency: 2 x weekly ☐ PRN ☐ MMI Patient/Released from Care

Doctors Notes: less upper Thoracic spasm noted Today.

Patient Tolerated Treatment well: ☒ Yes ☐ No

☒ Scan☒ Posted

Billed \_\_\_\_\_

Dr. MA

## DAILY S.O.A.P. NOTES

Patient Name: REICH, YOSIE

D/A: 8/17/22

Date of Service: 12/26/22

DX: (1) M50.120

Initial Exam: 9/16/22

☒ Patient, Dr, Staff all masked. Tx rooms  
sanitized prior to each patient. Masks offered/  
available for all. Covid 19 symptomology/  
possible exposure/ vaccination education  
discussed.

(2) M54.12

Re-Exam: 12/2/22

(3) M51.16

Ins Co: CHUBB

(4) M54.14

Claim #: 092022026731

Patient Working: ☐ Yes ☒ No

Additional Remarks: \_\_\_\_\_

## SUBJECTIVE COMPLAINTS

## Pain Intensity :

No Pain

Distressing Pain

Unbearable Pain

## Radicular/Paresthesias:

Cervical:	0	1	2	3	4	5	<u>6</u>	<u>7</u>	8	9	10	<input checked="" type="checkbox"/> R <input type="checkbox"/> L Upper Extremity
Thoracic:	0	1	2	3	4	5	<u>6</u>	<u>7</u>	8	9	10	<input checked="" type="checkbox"/> R <input checked="" type="checkbox"/> L Shoulder/Scapular
Lumbar:	0	1	2	3	4	5	<u>6</u>	<u>7</u>	8	9	10	<input type="checkbox"/> R <input type="checkbox"/> L Lower Extremity
Sacro-Pelvis:	0	1	2	3	4	5	<u>6</u>	<u>7</u>	8	9	10	<input checked="" type="checkbox"/> R <input checked="" type="checkbox"/> L Buttocks/Hip

Provocative Activities: ☒ Sitting ☒ Standing ☒ Walking ☒ Negotiating Stairs ☒ Bending ☒ Lifting ☒ Pulling/Pushing

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:

High Cervical:	<input checked="" type="checkbox"/> Spasm <u>4</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Mid Cervical:	<input checked="" type="checkbox"/> Spasm <u>4-5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Cerv-thoracic:	<input checked="" type="checkbox"/> Spasm <u>4-5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Thoracic:	<input checked="" type="checkbox"/> Spasm <u>4</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Thor-lumbar:	<input checked="" type="checkbox"/> Spasm <u>4</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Lumbar:	<input checked="" type="checkbox"/> Spasm <u>4-5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Lumbo-sacral:	<input checked="" type="checkbox"/> Spasm <u>4</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Pelvic/SI Joint:	<input checked="" type="checkbox"/> Spasm <u>4</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site

## Orthopedic/Provocative Tests:

Pos Neg

(R) Foraminal Compression:

☒ ☐

(R) Kemps':

☒ ☐

(L) Foraminal Compression:

☒ ☐

(L) Kemps':

☒ ☐

(R) Shoulder Abduction:

☒ ☐

(R) Straight Leg Raise:

☒ ☐

(L) Shoulder Abduction:

☒ ☐

(L) Straight Leg Raise:

☒ ☐

## 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: \_\_\_\_\_ ☐ 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

☐ NMR (97112) - ☐ Proprioception/Activation ☐ Positional Release/Balance ☐ Deltoid ☐ Supra/infraspinatus ☐ ITB ☐ Hamstring

☒ PPE (99072)

☒ Continue Prescribed TX Plan TX Frequency: 3 x weekly ☐ PRN ☐ MMI Patient/Released from Care

Doctors Notes: Less sacral spasm noted.Patient Tolerated Treatment well: ☒ Yes ☐ No☒ Scan☒ PostedDr. MA

Billed \_\_\_\_\_

Patient Name: RICH, YOSIE D/A: 8/17/22  
DX: (1) M50.120 Initial Exam: 9/16/22  
(2) M54.12 Re-Exam: 12/2/22  
(3) M51.16 Ins Co: CHUBB  
(4) M54.14 Claim #: 092022026731  
Patient Working: ☐ Yes ☒ No  
Additional Remarks:

Date of Service: 11/2/23  
☒ Patient, Dr, Staff all masked. Tx rooms  
sanitized prior to each patient. Masks offered/  
available for all. Covid 19 symptomology/  
possible exposure/ vaccination education  
discussed.

**SUBJECTIVE COMPLAINTS**

**Pain Intensity:** No Pain Distressing Pain Unbearable Pain  
Cervical: 0 1 2 3 4 5 6-8 8 9 10  
Thoracic: 0 1 2 3 4 5 6-7 8 9 10  
Lumbar: 0 1 2 3 4 5 6-8 8 9 10  
Sacro-Pelvis: 0 1 2 3 4 5 6-7 8 9 10  
Provocative Activities: ☒ Sitting ☒ Standing ☒ Walking ☒ Negotiating Stairs ☒ Bending ☒ Lifting ☒ Pulling/Pushing  
Additional Complaints:

**Radicular/Paresthesias:**

☒ R ☐ L Upper Extremity  
☒ R ☒ L Shoulder/Scapular  
☐ R ☐ L Lower Extremity  
☒ R ☒ L Buttocks/Hip

**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:	<input checked="" type="checkbox"/> Spasm <u>4</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Mid Cervical:	<input checked="" type="checkbox"/> Spasm <u>4</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Cerv-thoracic:	<input checked="" type="checkbox"/> Spasm <u>4-5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Thoracic:	<input checked="" type="checkbox"/> Spasm <u>4</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Thor-lumbar:	<input checked="" type="checkbox"/> Spasm <u>4</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Lumbar:	<input checked="" type="checkbox"/> Spasm <u>4-5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Lumbo-sacral:	<input checked="" type="checkbox"/> Spasm <u>4</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Pelvic/SI Joint:	<input checked="" type="checkbox"/> Spasm <u>4</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site

<b>Orthopedic/Provocative Tests:</b>	Pos	Neg		Pos	Neg
(R) Foraminal Compression:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(R) Kemps':	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(L) Foraminal Compression:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(L) Kemps':	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(R) Shoulder Abduction:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(R) Straight Leg Raise:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(L) Shoulder Abduction:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(L) Straight Leg Raise:	<input checked="" type="checkbox"/>	<input type="checkbox"/>

**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: ☐ 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  
☐ NMR (97112) - ☐ Proprioception/Activation ☐ Positional Release/Balance ☐ Deltoid ☐ Supra/infraspinatus ☐ ITB ☐ Hamstring  
☒ PPE (99072)

☒ Continue Prescribed TX Plan TX Frequency: 3 x weekly ☐ PRN ☐ MMI Patient/Released from Care

Doctors Notes: less mrd cervical spasm noted today.

Patient Tolerated Treatment well: ☒ Yes ☐ No

☐ Scan

☐ Posted

Billed

Dr. [Signature]



## DAILY S.O.A.P. NOTES

Patient Name: LECHY, JOSE

D/A: 8/17/22

Date of Service: 11/9/23

DX: (1) M50.120 Initial Exam: 9/16/22  
 (2) M54.12 Re-Exam: 12/2/22  
 (3) M51.16 Ins Co: CHUBB  
 (4) M54.14 Claim #: 092022026731

☒ Patient, Dr, Staff all masked. Tx rooms  
 sanitized prior to each patient. Masks offered/  
 available for all. Covid 19 symptomology/  
 possible exposure/ vaccination education  
 discussed.

Patient Working: ☐ Yes ☒ No

Additional Remarks: \_\_\_\_\_

## SUBJECTIVE COMPLAINTS

**Pain Intensity :** No Pain Distressing Pain Unbearable Pain

	0	1	2	3	4	5	6	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
Sacro-Pelvis:	0	1	2	3	4	5	6	7	8	9	10

**Radicular/Paresthesias:**  
☒ R ☐ L Upper Extremity  
☒ R ☒ L Shoulder/Scapular  
☐ R ☐ L Lower Extremity  
☒ R ☒ L Buttocks/Hip

Provocative Activities: ☒ Sitting ☒ Standing ☒ Walking ☒ Negotiating Stairs ☒ Bending ☒ Lifting ☒ Pulling/Pushing

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:

	Spasm	ROM	Tenderness	Segmental Dysfunction/VSC	CMT Site
High Cervical:	<input checked="" type="checkbox"/> 4	<input checked="" type="checkbox"/> Restricted	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Mid Cervical:	<input checked="" type="checkbox"/> 4	<input checked="" type="checkbox"/> Restricted	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Cerv-thoracic:	<input checked="" type="checkbox"/> 4	<input checked="" type="checkbox"/> Restricted	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Thoracic:	<input checked="" type="checkbox"/> 4	<input checked="" type="checkbox"/> Restricted	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Thor-lumbar:	<input checked="" type="checkbox"/> 4	<input checked="" type="checkbox"/> Restricted	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Lumbar:	<input checked="" type="checkbox"/> 4.5	<input checked="" type="checkbox"/> Restricted	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Lumbo-sacral:	<input checked="" type="checkbox"/> 4	<input checked="" type="checkbox"/> Restricted	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Pelvic/SI Joint:	<input checked="" type="checkbox"/> 4	<input checked="" type="checkbox"/> Restricted	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

## Orthopedic/Provocative Tests:

	Pos	Neg
(R) Foraminal Compression:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(L) Foraminal Compression:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(R) Shoulder Abduction:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(L) Shoulder Abduction:	<input checked="" type="checkbox"/>	<input type="checkbox"/>

	Pos	Neg
(R) Kemps':	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(L) Kemps':	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(R) Straight Leg Raise:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(L) Straight Leg Raise:	<input checked="" type="checkbox"/>	<input type="checkbox"/>

## 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: \_\_\_\_\_ ☐ 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  
☐ NMR (97112) - ☐ Proprioception/Activation ☐ Positional Release/Balance ☐ Deltoid ☐ Supra/infraspinatus ☐ ITB ☐ Hamstring  
☒ PPE (99072)

☒ Continue Prescribed TX Plan TX Frequency: 3 x weekly ☐ PRN ☐ MMI Patient/Released from Care

Doctors Notes: Lessening lower cervical spasm noted.

Patient Tolerated Treatment well: ☒ Yes ☐ No

☐ Scan☐ PostedBilled Dr. M.H.

# 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: [REDACTED]  
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

Until Re-evaluation : 1/25/23

Additional Remarks: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Sincerely,

  
Kevin M Haggerty, DC

Patient Name: FRANCESCO

D/A: 8/17/22

Date of Service: 11/11/23

DX: (1) M50.120

Initial Exam: 9/16/22

☒ Patient, Dr, Staff all masked. Tx rooms  
sanitized prior to each patient. Masks offered/  
available for all. Covid 19 symptomology/  
possible exposure/ vaccination education  
discussed.

(2) M54.12

Re-Exam: 12/2/22

(3) M51.16

Ins Co: CHUBB

(4) M54.14

Claim #: 092022026731

Patient Working: ☐ Yes ☒ No

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☒ R ☐ L Upper ExtremityThoracic: 0 1 2 3 4 5 6 7 8 9 10☒ R ☒ L Shoulder/ScapularLumbar: 0 1 2 3 4 5 6 7 8 9 10☐ R ☐ L Lower ExtremitySacro-Pelvis: 0 1 2 3 4 5 6 7 8 9 10☒ R ☒ L Buttocks/HipProvocative Activities: ☒ Sitting ☒ Standing ☒ Walking ☒ Negotiating Stairs ☒ Bending ☒ Lifting ☒ Pulling/Pushing

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:**High Cervical: ☒ Spasm 4 ☒ Restricted ROM ☒ Tenderness ☒ Segmental Dysfunction/VSC ☒ CMT SiteMid Cervical: ☒ Spasm 4 ☒ Restricted ROM ☒ Tenderness ☒ Segmental Dysfunction/VSC ☒ CMT SiteCerv-thoracic: ☒ Spasm 4 ☒ Restricted ROM ☒ Tenderness ☒ Segmental Dysfunction/VSC ☒ CMT SiteThoracic: ☒ Spasm 4 ☒ Restricted ROM ☒ Tenderness ☒ Segmental Dysfunction/VSC ☒ CMT SiteThor-lumbar: ☒ Spasm 4 ☒ Restricted ROM ☒ Tenderness ☒ Segmental Dysfunction/VSC ☒ CMT SiteLumbar: ☒ Spasm 4 ☒ Restricted ROM ☒ Tenderness ☒ Segmental Dysfunction/VSC ☒ CMT SiteLumbo-sacral: ☒ Spasm 4 ☒ Restricted ROM ☒ Tenderness ☒ Segmental Dysfunction/VSC ☒ CMT SitePelvic/SI Joint: ☒ Spasm 4 ☒ Restricted ROM ☒ Tenderness ☒ Segmental Dysfunction/VSC ☒ CMT Site**Orthopedic/Provocative Tests:**R) Foraminal Compression: ☒ Pos ☐ Neg (R) Kemps': ☒ Pos ☐ NegL) Foraminal Compression: ☒ Pos ☐ Neg (L) Kemps': ☒ Pos ☐ NegR) Shoulder Abduction: ☒ Pos ☐ Neg (R) Straight Leg Raise: ☒ Pos ☐ NegL) Shoulder Abduction: ☒ Pos ☐ Neg (L) Straight Leg Raise: ☒ Pos ☐ Neg**ASSESSMENT**Patient is: ☐ Stabilizing ☐ Progressing as Expected ☒ Overall Improvement ☐ Unchanged ☐ Temporary WorseningPatient states TX affords a degree of improved (MTG A.3): ☒ ADLs ☐ Positional Tolerance ☒ Mobility ☐ Strength ☐ Endurance**TREATMENT/PLAN**☒ 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/StretchingTherapeutic Exercise Regions: ☒ Cervical ☒ Lumbar ☒ Thoracic☒ NMR (97112) - ☐ Proprioception/Activation ☐ Positional Release/Balance ☐ Deltoid ☐ Supra/infraspinatus ☐ ITB ☐ Hamstring☒ PPE (99072)☒ Continue Prescribed TX Plan TX Frequency: 3 x weekly ☐ PRN ☐ MMI Patient/Released from CareDoctors Notes: Lessening lumbar spasm noted TodayPatient Tolerated Treatment well: ☒ Yes ☐ No☒ Scan☐ Posted

Billed \_\_\_\_\_

## DAILY S.O.A.P. NOTES

Patient Name: REICH, YOSIE

D/A: 8/17/22

Date of Service: 11/13/23

DX: (1) M50.120 Initial Exam: 9/16/22  
 (2) M54.12 Re-Exam: 12/2/22  
 (3) M51.16 Ins Co: CHUBB  
 (4) M54.14 Claim #: 092022026731

Patient Working: ☐ Yes ☒ No

☒ Patient, Dr, Staff all masked. Tx rooms  
 sanitized prior to each patient. Masks offered/  
 available for all. Covid 19 symptomology/  
 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	<input checked="" type="checkbox"/> R <input type="checkbox"/> L Upper Extremity
Thoracic:	0	1	2	3	4	5	6-0	8	9	10	<input checked="" type="checkbox"/> R <input checked="" type="checkbox"/> L Shoulder/Scapular	
Lumbar:	0	1	2	3	4	5	6	7	8	9	10	<input type="checkbox"/> R <input type="checkbox"/> L Lower Extremity
Sacro-Pelvis:	0	1	2	3	4	5	6	7	8	9	10	<input checked="" type="checkbox"/> R <input checked="" type="checkbox"/> L Buttocks/Hip

Provocative Activities: ☒ Sitting ☐ Standing ☐ Walking ☐ Negotiating Stairs ☐ Bending ☒ Lifting ☒ Pulling/Pushing

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:

High Cervical:	<input checked="" type="checkbox"/> Spasm <u>4</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Mid Cervical:	<input checked="" type="checkbox"/> Spasm <u>4</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Cerv-thoracic:	<input checked="" type="checkbox"/> Spasm <u>4</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Thoracic:	<input checked="" type="checkbox"/> Spasm <u>4-5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Thor-lumbar:	<input checked="" type="checkbox"/> Spasm <u>4-5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Lumbar:	<input checked="" type="checkbox"/> Spasm <u>4</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Lumbo-sacral:	<input checked="" type="checkbox"/> Spasm <u>4</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Pelvic/SI Joint:	<input checked="" type="checkbox"/> Spasm <u>4</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site

**Orthopedic/Provocative Tests:**

	Pos	Neg
(R) Foraminal Compression:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(L) Foraminal Compression:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(R) Shoulder Abduction:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(L) Shoulder Abduction:	<input checked="" type="checkbox"/>	<input type="checkbox"/>

	Pos	Neg
(R) Kemps':	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(L) Kemps':	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(R) Straight Leg Raise:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(L) Straight Leg Raise:	<input checked="" type="checkbox"/>	<input type="checkbox"/>

## ASSESSMENT

Patient is: ☐ Stabilizing ☐ Progressing as Expected ☐ Overall Improvement ☐ Unchanged ☒ Temporary WorseningPatient states TX affords a degree of improved (MTG A.3): ☒ ADLs ☐ Positional Tolerance ☐ Mobility ☐ Strength ☐ Endurance

## TREATMENT/PLAN

☐ 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  
☐ NMR (97112) - ☐ Proprioception/Activation ☐ Positional Release/Balance ☐ Deltoid ☐ Supra/infraspinatus ☐ ITB ☐ Hamstring  
☒ PPE (99072)

☒ Continue Prescribed TX Plan TX Frequency: 3 x weekly ☐ PRN ☐ MMI Patient/Released from Care

Doctors Notes: Continued marked upper back pain with radiation to  
shoulder blades and around the ribs. MRI to rule herniated  
discs and or need for other evaluation/treatment change.

Patient Tolerated Treatment well: ☒ Yes ☐ NoDr. MH☐ Scan☐ Posted

Billed \_\_\_\_\_

## DAILY S.O.A.P. NOTES

Patient Name: EDITH VOSE D/A: 8/17/22  
 DX: (1) M50.120 Initial Exam: 9/16/22  
 (2) M54.12 Re-Exam: 12/2/22  
 (3) M51.16 Ins Co: CHUBB  
 (4) M54.14 Claim #: 092022026731

Patient Working: ☐ Yes ☒ No

Additional Remarks: \_\_\_\_\_

Date of Service: 11/16/23

☒ Patient, Dr, Staff all masked. Tx rooms  
 sanitized prior to each patient. Masks offered/  
 available for all. Covid 19 symptomology/  
 possible exposure/ vaccination education  
 discussed.

## SUBJECTIVE COMPLAINTS

**Pain Intensity :** No Pain Distressing Pain Unbearable Pain  
 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  
 Sacro-Pelvis: 0 1 2 3 4 5 6 7 8 9 10  
**Radicular/Paresthesias:**  
 Cervical: ☒ R ☐ L Upper Extremity  
 Thoracic: ☒ R ☒ L Shoulder/Scapular  
 Lumbar: ☐ R ☐ L Lower Extremity  
 Sacro-Pelvis: ☒ R ☒ L Buttocks/Hip  
 Provocative Activities: ☒ Sitting ☒ Standing ☒ Walking ☒ Negotiating Stairs ☒ Bending ☒ Lifting ☒ Pulling/Pushing  
 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:

High Cervical:	<input checked="" type="checkbox"/> Spasm <u>4</u>	<input type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Mid Cervical:	<input checked="" type="checkbox"/> Spasm <u>4</u>	<input type="checkbox"/> Restricted ROM	<input type="checkbox"/> Tenderness	<input type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Cerv-thoracic:	<input checked="" type="checkbox"/> Spasm <u>4</u>	<input type="checkbox"/> Restricted ROM	<input type="checkbox"/> Tenderness	<input type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Thoracic:	<input checked="" type="checkbox"/> Spasm <u>4-5</u>	<input type="checkbox"/> Restricted ROM	<input type="checkbox"/> Tenderness	<input type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Thor-lumbar:	<input checked="" type="checkbox"/> Spasm <u>4-5</u>	<input type="checkbox"/> Restricted ROM	<input type="checkbox"/> Tenderness	<input type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Lumbar:	<input type="checkbox"/> Spasm <u>4</u>	<input type="checkbox"/> Restricted ROM	<input type="checkbox"/> Tenderness	<input type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Lumbo-sacral:	<input checked="" type="checkbox"/> Spasm <u>4</u>	<input type="checkbox"/> Restricted ROM	<input type="checkbox"/> Tenderness	<input type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Pelvic/SI Joint:	<input checked="" type="checkbox"/> Spasm <u>4</u>	<input type="checkbox"/> Restricted ROM	<input type="checkbox"/> Tenderness	<input type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site

**Orthopedic/Provocative Tests:** Pos Neg  
 (R) Foraminal Compression: ☒ ☐ (R) Kemps': ☒ ☐  
 (L) Foraminal Compression: ☒ ☐ (L) Kemps': ☒ ☐  
 (R) Shoulder Abduction: ☒ ☐ (R) Straight Leg Raise: ☒ ☐  
 (L) Shoulder Abduction: ☒ ☐ (L) Straight Leg Raise: ☒ ☐

## 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: \_\_\_\_\_ ☐ CMT (98940) ☒ CMT (98941) ☒ Massage-Spasm Sites (97124) ☐ EMS (97014)  
☒ Thera. Ex(97110) - ☐ Paraspinal Strengthen/Activation ☐ Dynamic Spinal Ext/Stab. ☐ Isokinetic Exercises ☒ ROM/PROM/Stretching  
 Therapeutic Exercise Regions: ☒ Cervical ☒ Lumbar ☒ Thoracic  
☐ NMR (97112) - ☐ Proprioception/Activation ☐ Positional Release/Balance ☐ Deltoid ☐ Supra/infraspinatus ☐ ITB ☐ Hamstring  
☒ PPE (99072)

☒ Continue Prescribed TX Plan TX Frequency: 3 x weekly ☐ PRN ☐ MMI Patient/Released from Care

Doctors Notes: Lessening difficulty noted rising from sitting.

Patient Tolerated Treatment well: ☒ Yes ☐ No

☐ Scan

☐ Posted

Billed Dr. [Signature]

DAILY S.O.A.P. NOTES

Patient Name: KEITH, YOSEF

D/A: 8/17/22

Date of Service: 1/23/23

DX: (1) M50.120 Initial Exam: 9/16/22  
(2) M54.12 Re-Exam: 12/2/22  
(3) M51.16 Ins Co: CHUBB  
(4) M54.14 Claim #: 092022026731

Patient Working: ☐ Yes ☒ No

Additional Remarks: \_\_\_\_\_

☒ Patient, Dr, Staff all masked. Tx rooms  
sanitized prior to each patient. Masks offered/  
available for all. Covid 19 symptomology/  
possible exposure/ vaccination education  
discussed.

**SUBJECTIVE COMPLAINTS**

**Pain Intensity :** No Pain Distressing Pain Unbearable Pain

	0	1	2	3	4	5	6	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
Sacro-Pelvis:	0	1	2	3	4	5	6	7	8	9	10

Provocative Activities: ☒ Sitting ☒ Standing ☒ Walking ☒ Negotiating Stairs ☒ Bending ☒ Lifting ☒ Pulling/Pushing

Additional Complaints: \_\_\_\_\_

**Radicular/Paresthesias:**

☒ R ☐ L Upper Extremity  
☒ R ☐ L Shoulder/Scapular  
☐ R ☐ L Lower Extremity  
☒ R ☐ L Buttocks/Hip

**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:**

	Spasm	ROM	Tenderness	Segmental Dysfunction/VSC	CMT Site
High Cervical:	4	Restricted	+	+	+
Mid Cervical:	4	Restricted	+	+	+
Cerv-thoracic:	4	Restricted	+	+	+
Thoracic:	4.5	Restricted	+	+	+
Thor-lumbar:	4	Restricted	+	+	+
Lumbar:	4	Restricted	+	+	+
Lumbo-sacral:	4	Restricted	+	+	+
Pelvic/SI Joint:	4	Restricted	+	+	+

**Orthopedic/Provocative Tests:**

	Pos	Neg		Pos	Neg
(R) Foraminal Compression:	+	+	(R) Kemps':	+	+
(L) Foraminal Compression:	+	+	(L) Kemps':	+	+
(R) Shoulder Abduction:	+	+	(R) Straight Leg Raise:	+	+
(L) Shoulder Abduction:	+	+	(L) Straight Leg Raise:	+	+

**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: \_\_\_\_\_ ☐ 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  
☒ NMR (97112) - ☐ Proprioception/Activation ☐ Positional Release/Balance ☐ Deltoid ☐ Supra/infraspinatus ☐ ITB ☐ Hamstring  
☒ PPE (99072)

☒ Continue Prescribed TX Plan TX Frequency: 3 x weekly ☐ PRN ☐ MMI Patient/Released from Care

Doctors Notes: Less lower thoracic spasm noted today

Patient Tolerated Treatment well: ☒ Yes ☐ No

Dr. MH

☐ 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: ~~JOSEPH REICH~~  
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.

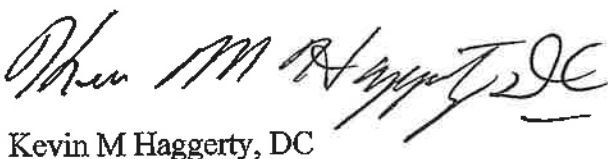
## PERIOD OF DISABILITY

From: 1/25/23

Until Re-evaluation : 2/15/23

Additional Remarks: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Sincerely,

  
Kevin M Haggerty, DC

## DAILY S.O.A.P. NOTES

Patient Name: KEITH YONE

D/A: 8/17/22

Date of Service: 1/25/23

DX: (1) M50.120 Initial Exam: 9/16/22  
 (2) M54.12 Re-Exam: 12/2/22  
 (3) M51.16 Ins Co: CHUBB  
 (4) M54.14 Claim #: 092022026731

Patient Working: ☐ Yes ☒ No

☒ Patient, Dr, Staff all masked. Tx rooms  
 sanitized prior to each patient. Masks offered/  
 available for all. Covid 19 symptomology/  
 possible exposure/ vaccination education  
 discussed.

Additional Remarks: \_\_\_\_\_

SUBJECTIVE COMPLAINTS

**Pain Intensity:** No Pain Distressing Pain Unbearable Pain

Cervical:	0	1	2	3	4	5	6	7	8	9	10	<input checked="" type="checkbox"/> R <input type="checkbox"/> L Upper Extremity
Thoracic:	0	1	2	3	4	5	6	7	8	9	10	<input checked="" type="checkbox"/> R <input checked="" type="checkbox"/> L Shoulder/Scapular
Lumbar:	0	1	2	3	4	5	6	7	8	9	10	<input type="checkbox"/> R <input type="checkbox"/> L Lower Extremity
Sacro-Pelvis:	0	1	2	3	4	5	6	7	8	9	10	<input checked="" type="checkbox"/> R <input checked="" type="checkbox"/> L Buttocks/Hip

Provocative Activities: ☒ Sitting ☒ Standing ☒ Walking ☐ Negotiating Stairs ☒ Bending ☒ Lifting ☒ Pulling/Pushing

Additional Complaints: \_\_\_\_\_

OBJECTIVE FINDINGSSpasm Grading: (1)Mild (2)Mild/Moderate (3)Moderate (4)Moderate/Marked (5)Marked (6)Marked/Severe (7)Severe Key: + Abnormal ☐ UnremarkablePassive ROM / Dynamic Palpation / Chiropractic Manipulation Sites:

High Cervical:	<input checked="" type="checkbox"/> Spasm <u>4</u>	<input type="checkbox"/> Restricted ROM	<input type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Mid Cervical:	<input checked="" type="checkbox"/> Spasm <u>4</u>	<input type="checkbox"/> Restricted ROM	<input type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Cerv-thoracic:	<input checked="" type="checkbox"/> Spasm <u>4</u>	<input type="checkbox"/> Restricted ROM	<input type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Thoracic:	<input checked="" type="checkbox"/> Spasm <u>4</u>	<input type="checkbox"/> Restricted ROM	<input type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Thor-lumbar:	<input checked="" type="checkbox"/> Spasm <u>4</u>	<input type="checkbox"/> Restricted ROM	<input type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Lumbar:	<input checked="" type="checkbox"/> Spasm <u>4</u>	<input type="checkbox"/> Restricted ROM	<input type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Lumbo-sacral:	<input checked="" type="checkbox"/> Spasm <u>4</u>	<input type="checkbox"/> Restricted ROM	<input type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Pelvic/SI Joint:	<input checked="" type="checkbox"/> Spasm <u>4</u>	<input type="checkbox"/> Restricted ROM	<input type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site

Orthopedic/Provocative Tests:

	Pos	Neg		Pos	Neg
(R) Foraminal Compression:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(R) Kemps':	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(L) Foraminal Compression:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(L) Kemps':	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(R) Shoulder Abduction:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(R) Straight Leg Raise:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(L) Shoulder Abduction:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(L) Straight Leg Raise:	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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: \_\_\_\_\_ ☐ 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  
☐ NMR (97112) - ☐ Proprioception/Activation ☐ Positional Release/Balance ☐ Deltoid ☐ Supra/infraspinatus ☐ ITB ☐ Hamstring

☒ Continue Prescribed TX Plan TX Frequency: 3 x weekly ☐ PRN ☐ MMI Patient/Released from Care

Doctors Notes: Less Thoracic spasm noted today

Patient Tolerated Treatment well: ☒ Yes ☐ No

☒ Scan☒ Posted

Billed \_\_\_\_\_

Dr. MA



DAILY S.O.A.P. NOTES

Patient Name: Michael J. [REDACTED] D/A: 8/17/22  
DX: (1) M50.120 Initial Exam: 9/16/22  
(2) M54.12 Re-Exam: 12/2/22  
(3) M51.16 Ins Co: CHUBB  
(4) M54.14 Claim #: 092022026731  
Patient Working: ☐ Yes ☒ No  
Additional Remarks: \_\_\_\_\_

Date of Service: 1/20/23

**§ Patient, Dr, Staff all masked. Tx rooms sanitized prior to each patient. Masks offered/available for all. Covid 19 symptomology/possible exposure/ vaccination education discussed.**

**SUBJECTIVE COMPLAINTS**

**Pain Intensity :** No Pain Distressing Pain Unbearable Pain  
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  
Sacro-Pelvis: 0 1 2 3 4 5 6 7 8 9 10  
Provocative Activities: ☒ Sitting ☒ Standing ☒ Walking ☒ Negotiating Stairs ☒ Bending ☒ Lifting ☒ Pulling/Pushing  
Additional Complaints: \_\_\_\_\_

**Radicular/Paresthesias:**

☒ R ☐ L Upper Extremity  
☒ R ☒ L Shoulder/Scapular  
☐ R ☐ L Lower Extremity  
☒ R ☒ L Buttocks/Hip

**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:	<input checked="" type="checkbox"/> Spasm <u>4</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Mid Cervical:	<input checked="" type="checkbox"/> Spasm <u>4</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Cerv-thoracic:	<input checked="" type="checkbox"/> Spasm <u>4</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Thoracic:	<input checked="" type="checkbox"/> Spasm <u>4-5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Thor-lumbar:	<input checked="" type="checkbox"/> Spasm <u>4-5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Lumbar:	<input checked="" type="checkbox"/> Spasm <u>4</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Lumbo-sacral:	<input checked="" type="checkbox"/> Spasm <u>4</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Pelvic/SI Joint:	<input checked="" type="checkbox"/> Spasm <u>4</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site

**Orthopedic/Provocative Tests:**

	Pos	Neg		Pos	Neg
(R) Foraminal Compression:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(R) Kemps':	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(L) Foraminal Compression:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(L) Kemps':	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(R) Shoulder Abduction:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(R) Straight Leg Raise:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(L) Shoulder Abduction:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(L) Straight Leg Raise:	<input checked="" type="checkbox"/>	<input type="checkbox"/>

**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: \_\_\_\_\_ ☐ 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  
☐ NMR (97112) - ☐ Proprioception/Activation ☐ Positional Release/Balance ☐ Deltoid ☐ Supra/infraspinatus ☐ ITB ☐ Hamstring  
☒ PPE (99072)

☒ Continue Prescribed TX Plan TX Frequency: 3 x weekly ☐ PRN ☐ MMI Patient/Released from Care

Doctors Notes: Thoracic MRI shows T3-4, T4-5 left posterior herniations with canal stenosis. Traction to start for Thoracic spinal region.

Patient Tolerated Treatment well: ☒ Yes ☐ No

☒ Scan

☒ Posted

Billed \_\_\_\_\_

Dr. [Signature]

DAILY S.O.A.P. NOTES

Patient Name: Michael Joseph D/A: 8/17/22  
DX: (1) M50.120 Initial Exam: 9/16/22  
(2) M54.12 Re-Exam: 12/2/22  
(3) M51.16 Ins Co: CHUBB  
(4) M54.14 Claim #: 092022026731  
Patient Working: ☐ Yes ☒ No  
Additional Remarks:

Date of Service: 11/27/23  
☒ Patient, Dr, Staff all masked. Tx rooms  
sanitized prior to each patient. Masks offered/  
available for all. Covid 19 symptomology/  
possible exposure/ vaccination education  
discussed.

SUBJECTIVE COMPLAINTS

**Pain Intensity :** No Pain Distressing Pain Unbearable Pain  
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  
Sacro-Pelvis: 0 1 2 3 4 5 6 7 8 9 10  
Provocative Activities: ☒ Sitting ☒ Standing ☒ Walking ☒ Negotiating Stairs ☒ Bending ☒ Lifting ☒ Pulling/Pushing  
Additional Complaints:

Radicular/Paresthesias:

☒ R ☐ L Upper Extremity  
☒ R ☒ L Shoulder/Scapular  
☐ R ☐ L Lower Extremity  
☒ R ☒ L Buttocks/Hip

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:	<input checked="" type="checkbox"/> Spasm <u>4</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Mid Cervical:	<input checked="" type="checkbox"/> Spasm <u>4</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Cerv-thoracic:	<input checked="" type="checkbox"/> Spasm <u>4</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Thoracic:	<input checked="" type="checkbox"/> Spasm <u>4</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Thor-lumbar:	<input checked="" type="checkbox"/> Spasm <u>4</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Lumbar:	<input checked="" type="checkbox"/> Spasm <u>4</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Lumbo-sacral:	<input checked="" type="checkbox"/> Spasm <u>4</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Pelvic/SI Joint:	<input checked="" type="checkbox"/> Spasm <u>4-3</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site

Orthopedic/Provocative Tests:

	Pos	Neg		Pos	Neg
(R) Foraminal Compression:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(R) Kemps':	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(L) Foraminal Compression:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(L) Kemps':	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(R) Shoulder Abduction:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(R) Straight Leg Raise:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(L) Shoulder Abduction:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(L) Straight Leg Raise:	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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: ☐ 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  
☐ NMR (97112) - ☐ Proprioception/Activation ☐ Positional Release/Balance ☐ Deltoid ☐ Supra/infraspinatus ☐ ITB ☐ Hamstring

☒ Continue Prescribed TX Plan TX Frequency: 3 x weekly ☐ PRN ☐ MMI Patient/Released from Care

Doctors Notes: less pelvic/SI spasm noted Today

Patient Tolerated Treatment well: ☒ Yes ☐ No

Dr. 3

☒ Scan

☒ Posted

Billed

## DAILY S.O.A.P. NOTES

Patient Name: REICH, YOSEF

D/A: 8/17/22

Date of Service: 11/21/23

DX: (1) M50.120

Initial Exam: 9/16/22

☒ Patient, Dr, Staff all masked. Tx rooms  
sanitized prior to each patient. Masks offered/  
available for all. Covid 19 symptomology/  
possible exposure/ vaccination education  
discussed.

(2) M54.12

Re-Exam: 12/2/22

(3) M51.16

Ins Co: CHUBB

(4) M54.14

Claim #: 092022026731

Patient Working: ☐ Yes ☒ No

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☐ R ☐ L Upper ExtremityThoracic: 0 1 2 3 4 5 6 7 8 9 10☐ R ☒ L Shoulder/ScapularLumbar: 0 1 2 3 4 5 6 7 8 9 10☐ R ☐ L Lower ExtremitySacro-Pelvis: 0 1 2 3 4 5 6 7 8 9 10☐ R ☒ L Buttocks/HipProvocative Activities: ☒ Sitting ☒ Standing ☒ Walking ☐ Negotiating Stairs ☒ Bending ☒ Lifting ☐ Pulling/Pushing

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:

High Cervical: ☒ Spasm 3-4 ☐ Restricted ROM☐ Tenderness ☒ Segmental Dysfunction/VSC☐ CMT SiteMid Cervical: ☒ Spasm 4 ☐ Restricted ROM☒ Tenderness ☒ Segmental Dysfunction/VSC☒ CMT SiteCerv-thoracic: ☒ Spasm 4 ☐ Restricted ROM☒ Tenderness ☒ Segmental Dysfunction/VSC☒ CMT SiteThoracic: ☒ Spasm 4 ☐ Restricted ROM☒ Tenderness ☒ Segmental Dysfunction/VSC☒ CMT SiteThor-lumbar: ☒ Spasm 4 ☐ Restricted ROM☒ Tenderness ☒ Segmental Dysfunction/VSC☒ CMT SiteLumbar: ☒ Spasm 4 ☐ Restricted ROM☒ Tenderness ☒ Segmental Dysfunction/VSC☒ CMT SiteLumbo-sacral: ☒ Spasm 4 ☐ Restricted ROM☒ Tenderness ☒ Segmental Dysfunction/VSC☒ CMT SitePelvic/SI Joint: ☒ Spasm 3-4 ☐ Restricted ROM☒ Tenderness ☒ Segmental Dysfunction/VSC☒ CMT Site

## Orthopedic/Provocative Tests:

Pos Neg

(R) Foraminal Compression:

☒ ☐

(R) Kemps':

Pos Neg

☒ ☐

(L) Foraminal Compression:

☒ ☐

(L) Kemps':

☒ ☐

(R) Shoulder Abduction:

☒ ☐

(R) Straight Leg Raise:

☒ ☐

(L) Shoulder Abduction:

☒ ☐

(L) Straight Leg Raise:

☒ ☐

## ASSESSMENT

Patient is: ☐ Stabilizing ☐ Progressing as Expected ☒ Overall Improvement ☐ Unchanged ☐ Temporary WorseningPatient states TX affords a degree of improved (MTG A.3): ☒ ADLs ☐ Positional Tolerance ☒ Mobility ☐ Strength ☐ Endurance

## TREATMENT/PLAN

☐ 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/StretchingTherapeutic Exercise Regions: ☒ Cervical ☒ Lumbar ☒ Thoracic☐ NMR (97112) - ☐ Proprioception/Activation ☐ Positional Release/Balance ☐ Deltoid ☐ Supra/infraspinatus ☐ ITB ☐ Hamstring☒ Continue Prescribed TX Plan TX Frequency: 3 x weekly ☐ PRN ☐ MMI Patient/Released from CareDoctors Notes: less upper cervical spasm noted.Patient Tolerated Treatment well: ☒ Yes ☐ 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: ~~XXXXXXXXXX~~  
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.

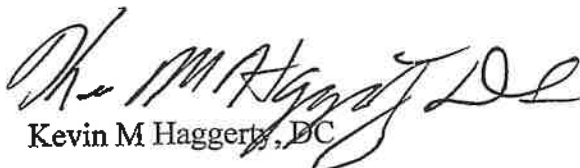
## PERIOD OF DISABILITY

From: 2/15/23

Until Re-evaluation : 3/15/23

Additional Remarks: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Sincerely,

  
Kevin M Haggerty, D.C.

DAILY S.O.A.P. NOTES

D/A: 8/17/22

Date of Service: 8/21/23

Patient Name: RECH, YOSIE  
 DX: (1) M50.120 Initial Exam: 9/16/22  
 (2) M54.12 Re-Exam: 12/2/22  
 (3) M51.16 Ins Co: CHUBB  
 (4) M54.14 Claim #: 092022026731

Patient Working: ☐ Yes ☒ No

Additional Remarks:

☒ Patient, Dr, Staff all masked. Tx rooms  
 sanitized prior to each patient. Masks offered/  
 available for all. Covid 19 symptomology/  
 possible exposure/ vaccination education  
 discussed.

SUBJECTIVE COMPLAINTS

**Pain Intensity :** No Pain Distressing Pain Unbearable Pain **Radicular/Paresthesias:**

Cervical:	0	1	2	3	4	5	6	7	8	9	10	<input checked="" type="checkbox"/> R <input type="checkbox"/> L Upper Extremity
Thoracic:	0	1	2	3	4	5	6	7	8	9	10	<input checked="" type="checkbox"/> R <input checked="" type="checkbox"/> L Shoulder/Scapular
Lumbar:	0	1	2	3	4	5	6	7	8	9	10	<input type="checkbox"/> R <input type="checkbox"/> L Lower Extremity
Sacro-Pelvis:	0	1	2	3	4	5	6	7	8	9	10	<input checked="" type="checkbox"/> R <input checked="" type="checkbox"/> L Buttocks/Hip

Provocative Activities: ☒ Sitting ☒ Standing ☒ Walking ☒ Negotiating Stairs ☒ Bending ☒ Lifting ☒ Pulling/Pushing

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:

High Cervical:	<input checked="" type="checkbox"/> Spasm <u>4-5</u>	<input type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Mid Cervical:	<input checked="" type="checkbox"/> Spasm <u>5</u>	<input type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Cerv-thoracic:	<input checked="" type="checkbox"/> Spasm <u>5</u>	<input type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Thoracic:	<input checked="" type="checkbox"/> Spasm <u>5</u>	<input type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Thor-lumbar:	<input checked="" type="checkbox"/> Spasm <u>5</u>	<input type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Lumbar:	<input checked="" type="checkbox"/> Spasm <u>5</u>	<input type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Lumbo-sacral:	<input checked="" type="checkbox"/> Spasm <u>5</u>	<input type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Pelvic/SI Joint:	<input checked="" type="checkbox"/> Spasm <u>5</u>	<input type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site

**Orthopedic/Provocative Tests:** Pos Neg

(R) Foraminal Compression:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(R) Kemps':	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(L) Foraminal Compression:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(L) Kemps':	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(R) Shoulder Abduction:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(R) Straight Leg Raise:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(L) Shoulder Abduction:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(L) Straight Leg Raise:	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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: ☐ 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  
☐ NMR (97112) - ☐ Proprioception/Activation ☐ Positional Release/Balance ☐ Deltoid ☐ Supra/infraspinatus ☐ ITB ☐ Hamstring

☒ Continue Prescribed TX Plan TX Frequency: 2 x weekly ☐ PRN ☐ MMI Patient/Released from Care

Doctors Notes: Interrupted Treatment due to being out of the country  
for 3 weeks. Increased neck and back pain due to the interrupted  
Treatment. Continued Treatment is medically necessary.

Patient Tolerated Treatment well: ☒ Yes ☐ No

Dr. W/L

☒ Scan

☒ Posted

Billed

# Advanced Rockland Chiropractic Offices, P.C.

Kevin M. Haggerty, DC

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

## RE-EXAMINATION NARRATIVE

### Treatment Plan

NAME: JOSEF REICK DATE: 2/21/23 Acct #: 2174 NF

☐ Female ☒ Male Date of Onset: 8/17/22 Mode of Injury: ☒ MVA ☐ WC ☐ Other \_\_\_\_\_

### SUBJECTIVE COMPLAINTS:

**Pain Intensity :** No Pain Excruciating

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
Sacro-Pelvis:	0	1	2	3	4	5	6-7	8	9	10

- ☐ Patient improving as expected with progressive functional enhancement  
☐ Exacerbation  
☐ Re-Injury  
☒ Lack of Continuity with care  
☐ Functional improvement noted, however, co-morbidities are delaying healing process

**Additional Remarks:** Patient had to leave the country for personal reasons. Increased neck and back pain due to the interrupted treatment.

### Radicular/Paresthesias:

- ☒ R ☐ L Upper Extremity ☒ R ☒ L Shoulder/Scapular ☒ Numbness/Tingling  
☐ R ☐ L Lower Extremity ☒ R ☒ L Buttocks/Hip ☐ Weakness/Impairment

### Present Disability/Impairment:

- ☐ Working ☐ Not Working ☒ Temporary Total Disability ☐ Partial Disability ☐ \_\_\_\_\_

### NEURO-SPINAL FUNCTIONAL EXAMINATION

**Postural Kinesiological Function:** Key: + Tested Abnormal ☐ Presently Unremarkable

Forward Head Posture: ☒ Head Tilt: ☐ Loss Normal Spinal Model: ☒  
Shoulder Level Asymmetry: ☒ Pelvic Level Asymmetry: ☒ Antalgic Gait: ☐  
Guarded Gait: ☐ Leg Length Asymmetry: ☒

**Muscle Function/Palpable Spasm:** Grade: (1) Mild (2) Mild/Moderate (3) Moderate (4) Moderate/Marked (5) Marked (6) Marked/Severe (7) Severe

Cervical: 5/7 Thoracic: 5/7 Lumbar: 5/7 Sacro/Pelvic: 5/7

### Passive ROM/Joint Complex Motion Palpation:

Upper Cervical:	<input checked="" type="checkbox"/> Hypomobile Joint Function/VSC	<input checked="" type="checkbox"/> Inflammation/Tenderness	<input type="checkbox"/> Histopathology
Cervical:	<input checked="" type="checkbox"/> Hypomobile Joint Function/VSC	<input checked="" type="checkbox"/> Inflammation/Tenderness	<input checked="" type="checkbox"/> Histopathology
Thoracic:	<input checked="" type="checkbox"/> Hypomobile Joint Function/VSC	<input checked="" type="checkbox"/> Inflammation/Tenderness	<input checked="" type="checkbox"/> Histopathology
Lumbar:	<input checked="" type="checkbox"/> Hypomobile Joint Function/VSC	<input checked="" type="checkbox"/> Inflammation/Tenderness	<input checked="" type="checkbox"/> Histopathology
Sacral:	<input checked="" type="checkbox"/> Hypomobile Joint Function/VSC	<input checked="" type="checkbox"/> Inflammation/Tenderness	<input checked="" type="checkbox"/> Histopathology
Pelvic:	<input checked="" type="checkbox"/> Hypomobile Joint Function/VSC	<input checked="" type="checkbox"/> Inflammation/Tenderness	<input type="checkbox"/> Histopathology



Exam Date: 2/21/23

ADVANCED ROCKLAND CHIROPRACTIC OFFICES, PC

Acct #: 2174**Active ROM Function (Arthrodial Protractor):**

Cervical Flexion: 30 / 50°  
 Cervical Extension: 40 / 70°  
 Cervical R Rotation: 40 / 85°  
 Cervical L Rotation: 40 / 85°  
 Cervical R Lateral Flexion: 15 / 45°  
 Cervical L Lateral Flexion: 15 / 45°

Thoraco-Lumbar Flexion: 60 / 90°  
 Thoraco-Lumbar Extension: 15 / 30°  
 Thoraco-Lumbar R Lateral Flexion: 20 / 35°  
 Thoraco-Lumbar L Lateral Flexion: 20 / 35°

**Trigger Points/Nociceptive Facilitation:**

☒ Trapizius ☒ Levator ☒ Periformis ☒ Hamstrings ☒ Other Supra/infraspinatus

**Sensory Neurological Function: (Pinwheel-Light Touch) Key: + Sensory Deficits Unremarkable**

Right Upper Extremity: ☐ C5 ☐ C6 ☒ C7 ☒ C8 ☐ T1  
 Left Upper Extremity: ☐ C5 ☐ C6 ☒ C7 ☐ C8 ☐ T1  
 Right Lower Extremity: ☐ L4 ☒ L5 ☒ S1  
 Left Lower Extremity: ☐ L4 ☒ L5 ☒ S1

Hyperesthesias/Sensory Abnormalities: \_\_\_\_\_

**Deep Tendon Reflexes:** Grading: (0)Trace (1+)Hypoactive (2+)WNL (3+)Mild Hyperactivity (4+) Hyperactive

All Within Normal Limits (2+) Except where noted:

RUE: 2+ Biceps 2+ Brachioradialis 1+ Triceps  
 LUE: 2+ Biceps 2+ Brachioradialis 2+ Triceps  
 RLE: 2+ Patellar 2+ Achilles'  
 LLE: 2+ Patellar 2+ Achilles'

**Motor Function/Muscle Strength:** All Within Normal Limits (5/5) Except where noted

Cervico-Thoracic Extension: 4 / 5 Thoraco Lumbar Extension: 4 / 5  
 (R) Shoulder Abduction: 5 / 5 (R) Hip Flexors: 5 / 5  
 (L) Shoulder Abduction: 4 / 5 (L) Hip Flexors: 5 / 5  
 (R) Wrist Extension: 5 / 5 (R) Leg Extension: 5 / 5  
 (L) Wrist Extension: 4 / 5 (L) Leg Extension: 5 / 5  
 (R) Wrist Flexion: 5 / 5 (R) Heel Walk: 4 / 5  
 (L) Wrist Flexion: 5 / 5 (L) Heel Walk: 4 / 5  
 (R) Hand Grip: 5 / 5 (R) Toe Walk: 4 / 5  
 (L) Hand Grip: 5 / 5 (L) Toe Walk: 4 / 5

**Orthopedic Tests/Spinal Nerve Function:** (+) Positive ☐ Unremarkable

Foraminal Compression: ☒ Right ☒ Left Milgrams: ☐  
 Cervical Kemps: ☒ Right ☒ Left Valsalva: ☐  
 Straight Leg Raise: ☒ Right ☒ Left  
 Thoraco-Lumbar Kemps: ☒ Right ☒ Left  
 Sacro-Iliac Compression: ☒ Right ☒ Left

+ cervical Distraction

+ shoulder abduction bilaterally.

**Cerebellar/Proprioceptive Balance/Dysafferentation:**

Rhombergs: ☐ Unsteady ☐ Sway ☐ Blethrospasm ☒ Within Normal Limits  
 One Leg Stand: ☐ Unsteady ☐ Sway ☒ Short Duration ☐ Within Normal Limits  
 Finger to Nose: ☐ Miss ☐ Unsteady ☐ Sway ☒ Within Normal Limits

Exam Date: 2/21/23

ADVANCED ROCKLAND CHIROPRACTIC OFFICES, PC

Acct #: 2174TREATMENT GOALS

Chiropractic Manipulative Treatment: (98940, 98941, 98942)

To correct subluxations, increase joint neurophysiological function, enhance proprioceptive function, reduce pain and support homeostasis. Sites: Specific to levels of hypomobile joint function/subluxation.

Neuromuscular Re-Education: (97112)

To improve balance, proprioception, coordination, posture and kinesthetic sense. Including neuro-muscular active release technique and active neuro-muscular impulse protocols and postural coordination movements.

Therapeutic Massage: (97124)

Percussion, compression, acupressure and effleurage. Enhance circulation and soft tissue healing. Reduce inflammation and adhesions. Prepare patient for active protocols.

Therapeutic Activities: (97530)

Spinal stabilization. Dynamic activities and protocols to strengthen the spine in its neural and anatomic position to improve functional performance and stabilization.

Therapeutic Exercises: (97110)

To increase range of motion, strength, flexibility and endurance function.

Hot/Cold Pac: (97010)

To enhance pain reduction, inflammation and spasm. Promote flexibility function.

Electrical Muscle Stimulation: (97014)

To help reduce pain, spasm and adhesions.

Other: ( ) \_\_\_\_\_

FUNCTIONAL PATIENT RESPONSE ASSESSMENT SINCE LAST EVALUATION

ADL Functional Improvements:	Unchanged	Steady Progress	Significant Progress	Restored
Self Care/Personal Hygiene:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sleep Quality/Quantity:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sitting Duration:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Standing Duration:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Walking Duration:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Negotiating Stairs:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Driving/Transportation:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recreation/Social Activities:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Concentration:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Interrupted Treatment*

Objective Functional Improvements:	Mild Improvement	Improving as Expected	Significant Improvement	Restored
Postural Tolerances:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Range of Motion Function:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Muscle Tonicity Function:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sensory Neurological Function:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reflex Neurological Function:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Motor Strength Function:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Proprioceptive Balance Function:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



Exam Date: 2/21/23

ADVANCED ROCKLAND CHIROPRACTIC OFFICES, PC

Acct #: 2174CLINICAL NECESSITY FOR CONTINUED CARE

- ☒ Re-examination reveals patient's response to care has been: ☒ Favorable ☐ Fair ☐ Unfavorable  
☒ Patient has reached pre-accident functional status: ☒ No ☐ Yes  
☒ Re-examination is most consistent with objective functional gains and a positive patient response.  
☒ Re-examination demonstrates efficacy of treatment and supports continued care.  
☒ The patient continues to exhibit objective functional improvements, however, comorbidities are delaying response to treatment. Delaying Factors:

☐ Diabetes ☐ Body Habitus ☐ Deconditioned Syndrome ☐ Interrupted Continuity of Care

☒ Complicating Factors/Findings: Herniated discs T3-4, T4-5 both left, with canal narrowing  
C4-5 right foraminal impingement. L5-S1 herniation with left S1 nerve impingement

TREATMENT PLAN

- ☒ Re-Evaluation (99212) ☐ CMT 1-2 (98940) ☐ H/C Pacs (97010)  
☐ XR-C2 (72040) PC ☒ CMT 3-4 (98941) ☒ Therapeutic Exercise (97110)  
☐ XR-C4 (72050) PC ☐ CMT 5 (98942) ☐ Therapeutic Activities (97010) or (97530)  
☐ XR-T2 (72070) PC ☐ NMR (97112)  
☐ XR-L2 (72100) PC ☐ Massage (97124)  
☐ XR-L4 (72110) PC ☒ EMS (97014) or (G0283)

- ☒ Updated Treatment Plan: ☐ 4x/weekly ☐ 3x/weekly ☒ 2x/weekly ☐ 1x/weekly  
Duration of Care: ☐ 3-4 weeks as outlined in the MTG ☒ 6 / weeks

- ☒ Patient tolerated TX well and TX was without incident.  
☒ Consistent with treatment guidelines, Patient will be evaluated on an ongoing basis to determine clinical necessity for MRI Diagnostic Studies.

Remarks: Patient's continued symptoms and positive objective findings  
are causally related to the MVA of 8/17/22.

Dr. Kevin M. Haggerty, D.C.

Dr. Kevin M. Haggerty

2/21/23

Date

## DAILY S.O.A.P. NOTES

Patient Name: [REDACTED] D/A: 8/17/22 Date of Service: 2/22/23  
 DX: (1) M50.120 Initial Exam: 9/16/22  
 (2) M54.12 Re-Exam: 2/22/23  
 (3) M51.16 Ins Co: CHUBB  
 (4) M54.14 Claim #: 092022026731

Patient Working: ☐ Yes ☒ No

Additional Remarks: \_\_\_\_\_

☒ Patient, Dr, Staff all masked. Tx rooms  
 sanitized prior to each patient. Masks offered/  
 available for all. Covid 19 symptomology/  
 possible exposure/ vaccination education  
 discussed.

## SUBJECTIVE COMPLAINTS

**Pain Intensity :** No Pain Distressing Pain Unbearable Pain

	0	1	2	3	4	5	6	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
Sacro-Pelvis:	0	1	2	3	4	5	6	7	8	9	10

**Radicular/Paresthesias:**  
☒ R ☐ L Upper Extremity  
☒ R ☒ L Shoulder/Scapular  
☐ R ☐ L Lower Extremity  
☒ R ☒ L Buttocks/Hip

Provocative Activities: ☒ Sitting ☐ Standing ☒ Walking ☐ Negotiating Stairs ☒ Bending ☒ Lifting ☒ Pulling/Pushing

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:

	Spasm	ROM	Tenderness	Segmental Dysfunction/VSC	CMT Site
High Cervical:	4-5	Restricted ROM	+	+	+
Mid Cervical:	4-5	Restricted ROM	+	+	+
Cerv-thoracic:	5	Restricted ROM	+	+	+
Thoracic:	5	Restricted ROM	+	+	+
Thor-lumbar:	5	Restricted ROM	+	+	+
Lumbar:	5	Restricted ROM	+	+	+
Lumbo-sacral:	5	Restricted ROM	+	+	+
Pelvic/SI Joint:	5	Restricted ROM	+	+	+

## Orthopedic/Provocative Tests:

	Pos	Neg
(R) Foraminal Compression:	+	<input type="checkbox"/>
(L) Foraminal Compression:	+	<input type="checkbox"/>
(R) Shoulder Abduction:	+	<input type="checkbox"/>
(L) Shoulder Abduction:	+	<input type="checkbox"/>

(R) Kemps': ☐ (L) Kemps': ☐  
 (R) Straight Leg Raise: ☐ (L) Straight Leg Raise: ☐

## 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: \_\_\_\_\_ ☐ 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  
☐ NMR (97112) - ☐ Proprioception/Activation ☐ Positional Release/Balance ☐ Deltoid ☐ Supra/infraspinatus ☐ ITB ☐ Hamstring

☒ Continue Prescribed TX Plan TX Frequency: 2 x weekly ☐ PRN ☐ MMI Patient/Released from Care

Doctors Notes: Less mid cervical spasm noted.

Patient Tolerated Treatment well: ☒ Yes ☐ No

☒ Scan

☒ Posted

Billed \_\_\_\_\_

Dr. MA

## DAILY S.O.A.P. NOTES

Patient Name: [REDACTED] D/A: 8/17/22  
 DX: (1) M50.120 Initial Exam: 9/16/22  
 (2) M54.12 Re-Exam: 2/22/23  
 (3) M51.16 Ins Co: CHUBB  
 (4) M54.14 Claim #: 092022026731  
 Patient Working: ☐ Yes ☒ No  
 Additional Remarks: \_\_\_\_\_

Date of Service: 2/22/23  
 \* Patient, Dr, Staff all masked. Tx rooms  
 sanitized prior to each patient. Masks offered/  
 available for all. Covid 19 symptomology/  
 possible exposure/ vaccination education  
 discussed.

## SUBJECTIVE COMPLAINTS

**Pain Intensity :** No Pain Distressing Pain Unbearable Pain  
 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  
 Sacro-Pelvis: 0 1 2 3 4 5 6 7 8 9 10  
**Radicular/Paresthesias:**  
☒ R ☐ L Upper Extremity  
☒ R ☒ L Shoulder/Scapular  
☐ R ☐ L Lower Extremity  
☒ R ☒ L Buttocks/Hip  
 Provocative Activities: ☒ Sitting ☒ Standing ☒ Walking ☒ Negotiating Stairs ☒ Bending ☒ Lifting ☒ Pulling/Pushing  
 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:

High Cervical:	<input checked="" type="checkbox"/> Spasm <u>4-5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Mid Cervical:	<input checked="" type="checkbox"/> Spasm <u>4-5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Cerv-thoracic:	<input checked="" type="checkbox"/> Spasm <u>5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Thoracic:	<input checked="" type="checkbox"/> Spasm <u>5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Thor-lumbar:	<input checked="" type="checkbox"/> Spasm <u>5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Lumbar:	<input checked="" type="checkbox"/> Spasm <u>5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Lumbo-sacral:	<input checked="" type="checkbox"/> Spasm <u>5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Pelvic/SI Joint:	<input checked="" type="checkbox"/> Spasm <u>4-5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site

**Orthopedic/Provocative Tests:** Pos Neg  
 (R) Foraminal Compression: ☒ ☐ (R) Kemps': ☒ ☐  
 (L) Foraminal Compression: ☒ ☐ (L) Kemps': ☒ ☐  
 (R) Shoulder Abduction: ☒ ☐ (R) Straight Leg Raise: ☒ ☐  
 (L) Shoulder Abduction: ☒ ☐ (L) Straight Leg Raise: ☒ ☐

## 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: \_\_\_\_\_ ☐ 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  
☐ NMR (97112) - ☐ Proprioception/Activation ☐ Positional Release/Balance ☐ Deltoid ☐ Supra/infraspinatus ☐ ITB ☐ Hamstring

☒ Continue Prescribed TX Plan TX Frequency: 2x weekly ☐ PRN ☐ MMI Patient/Released from Care

Doctors Notes: Less pelvic spasm noted Today

Patient Tolerated Treatment well: ☒ Yes ☐ No

Dr. [Signature]

☒ Scan

☒ Posted

Billed \_\_\_\_\_

## DAILY S.O.A.P. NOTES

Patient Name: REICHL, YOSEF

D/A: 8/17/22

Date of Service: 3/1/23

DX: (1) M50.120 Initial Exam: 9/16/22  
 (2) M54.12 Re-Exam: 2/22/23  
 (3) M51.16 Ins Co: CHUBB  
 (4) M54.14 Claim #: 092022026731

Patient Working: ☐ Yes ☒ No

☒ Patient, Dr, Staff all masked. Tx rooms  
 sanitized prior to each patient. Masks offered/  
 available for all. Covid 19 symptomology/  
 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	8 9 10	<input checked="" type="checkbox"/> R <input type="checkbox"/> L Upper Extremity
Thoracic:	0 1 2 3 4 5 6 7 8 9 10	8 9 10	<input checked="" type="checkbox"/> R <input checked="" type="checkbox"/> L Shoulder/Scapular
Lumbar:	0 1 2 3 4 5 6 7 8 9 10	8 9 10	<input type="checkbox"/> R <input type="checkbox"/> L Lower Extremity
Sacro-Pelvis:	0 1 2 3 4 5 6 7 8 9 10	8 9 10	<input checked="" type="checkbox"/> R <input checked="" type="checkbox"/> L Buttocks/Hip

Provocative Activities: ☒ Sitting ☒ Standing ☒ Walking ☒ Negotiating Stairs ☒ Bending ☒ Lifting ☒ Pulling/Pushing

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:

High Cervical:	<input checked="" type="checkbox"/> Spasm <u>4-5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Mid Cervical:	<input checked="" type="checkbox"/> Spasm <u>4-5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Cerv-thoracic:	<input checked="" type="checkbox"/> Spasm <u>5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Thoracic:	<input checked="" type="checkbox"/> Spasm <u>5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Thor-lumbar:	<input checked="" type="checkbox"/> Spasm <u>5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Lumbar:	<input checked="" type="checkbox"/> Spasm <u>5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Lumbo-sacral:	<input checked="" type="checkbox"/> Spasm <u>4-5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Pelvic/SI Joint:	<input checked="" type="checkbox"/> Spasm <u>4-5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input type="checkbox"/> CMT Site

Orthopedic/Provocative Tests:

	Pos	Neg		Pos	Neg
(R) Foraminal Compression:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(R) Kemps':	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(L) Foraminal Compression:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(L) Kemps':	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(R) Shoulder Abduction:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(R) Straight Leg Raise:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(L) Shoulder Abduction:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(L) Straight Leg Raise:	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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: \_\_\_\_\_ ☐ 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  
☐ NMR (97112) - ☐ Proprioception/Activation ☐ Positional Release/Balance ☐ Deltoid ☐ Supra/infraspinatus ☐ ITB ☐ Hamstring

☒ Continue Prescribed TX Plan TX Frequency: 2 x weekly ☐ PRN ☐ MMI Patient/Released from Care

Doctors Notes: Lessening sacral spasm noted today.

Patient Tolerated Treatment well: ☒ Yes ☐ No

Dr. MH

☐ Scan☐ Posted

Billed \_\_\_\_\_

## DAILY S.O.A.P. NOTES

Patient Name: XXXXXXXXXX

D/A: 8/17/22

Date of Service: 3/6/23

DX: (1) M50.120 Initial Exam: 9/16/22  
 (2) M54.12 Re-Exam: 2/22/23  
 (3) M51.16 Ins Co: CHUBB  
 (4) M54.14 Claim #: 092022026731

☒ Patient, Dr, Staff all masked. Tx rooms  
 sanitized prior to each patient. Masks offered/  
 available for all. Covid 19 symptomology/  
 possible exposure/ vaccination education  
 discussed.

Patient Working: ☐ Yes ☒ No

Additional Remarks: \_\_\_\_\_

SUBJECTIVE COMPLAINTS

**Pain Intensity :** No Pain Distressing Pain Unbearable Pain

Cervical:	0	1	2	3	4	5	6	7	8	9	10	<input checked="" type="checkbox"/> R <input type="checkbox"/> L Upper Extremity
Thoracic:	0	1	2	3	4	5	6	7	8	9	10	<input checked="" type="checkbox"/> R <input checked="" type="checkbox"/> L Shoulder/Scapular
Lumbar:	0	1	2	3	4	5	6	7	8	9	10	<input type="checkbox"/> R <input type="checkbox"/> L Lower Extremity
Sacro-Pelvis:	0	1	2	3	4	5	6	7	8	9	10	<input checked="" type="checkbox"/> R <input checked="" type="checkbox"/> L Buttocks/Hip

Provocative Activities: ☒ Sitting ☒ Standing ☒ Walking ☒ Negotiating Stairs ☒ Bending ☒ Lifting ☒ Pulling/Pushing

Additional Complaints: \_\_\_\_\_

OBJECTIVE FINDINGSSpasm Grading: (1)Mild (2)Mild/Moderate (3)Moderate (4)Moderate/Marked (5)Marked (6)Marked/Severe (7)Severe Key: + Abnormal ☐ UnremarkablePassive ROM / Dynamic Palpation / Chiropractic Manipulation Sites:

High Cervical:	<input checked="" type="checkbox"/> Spasm <u>4-5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Mid Cervical:	<input checked="" type="checkbox"/> Spasm <u>4-5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Cerv-thoracic:	<input checked="" type="checkbox"/> Spasm <u>5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Thoracic:	<input checked="" type="checkbox"/> Spasm <u>5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Thor-lumbar:	<input checked="" type="checkbox"/> Spasm <u>4-5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Lumbar:	<input checked="" type="checkbox"/> Spasm <u>5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Lumbo-sacral:	<input checked="" type="checkbox"/> Spasm <u>5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Pelvic/SI Joint:	<input checked="" type="checkbox"/> Spasm <u>5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site

**Orthopedic/Provocative Tests:**

	Pos	Neg		Pos	Neg
(R) Foraminal Compression:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(R) Kemps':	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(L) Foraminal Compression:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(L) Kemps':	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(R) Shoulder Abduction:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(R) Straight Leg Raise:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(L) Shoulder Abduction:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(L) Straight Leg Raise:	<input checked="" type="checkbox"/>	<input type="checkbox"/>

ASSESSMENTPatient is: ☐ Stabilizing ☒ Progressing as Expected ☐ Overall Improvement ☐ Unchanged ☐ Temporary WorseningPatient states TX affords a degree of improved (MTG A.3): ADLs ☐ Positional Tolerance ☒ Mobility ☐ Strength ☐ EnduranceTREATMENT/PLAN

☐ 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  
☐ NMR (97112) - ☐ Proprioception/Activation ☐ Positional Release/Balance ☐ Deltoid ☐ Supra/infraspinatus ☐ ITB ☐ Hamstring

Continue Prescribed TX Plan TX Frequency: 2x weekly ☐ PRN ☐ MMI Patient/Released from Care

Doctors Notes:

less lower thoracic spasm noted today  
Continued paresthesias in arms and legs, PTMG necessary  
to R/L Radiculopathy

Patient Tolerated Treatment well: ☒ Yes ☐ No

Dr. \_\_\_\_\_

☒ Scan☒ Posted

Billed \_\_\_\_\_

## DAILY S.O.A.P. NOTES

Patient Name: KEITH, YOSEF

D/A: 8/17/22

Date of Service: 3/8/23

DX: (1) M50.120

Initial Exam: 9/16/22

☒ Patient, Dr, Staff all masked. Tx rooms  
sanitized prior to each patient. Masks offered/  
available for all. Covid 19 symptomology/  
possible exposure/ vaccination education  
discussed.

(2) M54.12

Re-Exam: 2/22/23

(3) M51.16

Ins Co: CHUBB

(4) M54.14

Claim #: 092022026731

Patient Working: ☐ Yes ☒ No

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	<input checked="" type="checkbox"/> R <input type="checkbox"/> L Upper Extremity
Thoracic:	0	1	2	3	4	5	6	7	8	9	10	<input checked="" type="checkbox"/> R <input checked="" type="checkbox"/> L Shoulder/Scapular
Lumbar:	0	1	2	3	4	5	6	7	8	9	10	<input checked="" type="checkbox"/> R <input checked="" type="checkbox"/> L Lower Extremity
Sacro-Pelvis:	0	1	2	3	4	5	6	7	8	9	10	<input checked="" type="checkbox"/> R <input checked="" type="checkbox"/> L Buttocks/Hip

Provocative Activities: ☒ Sitting ☒ Standing ☒ Walking ☒ Negotiating Stairs ☒ Bending ☒ Lifting ☒ Pulling/Pushing

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:

High Cervical:	<input checked="" type="checkbox"/> Spasm <u>4-5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Mid Cervical:	<input checked="" type="checkbox"/> Spasm <u>4-5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Cerv-thoracic:	<input checked="" type="checkbox"/> Spasm <u>5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Thoracic:	<input checked="" type="checkbox"/> Spasm <u>5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Thor-lumbar:	<input checked="" type="checkbox"/> Spasm <u>4-5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Lumbar:	<input checked="" type="checkbox"/> Spasm <u>5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Lumbo-sacral:	<input checked="" type="checkbox"/> Spasm <u>5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Pelvic/SI Joint:	<input checked="" type="checkbox"/> Spasm <u>4-5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input checked="" type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site

## Orthopedic/Provocative Tests:

	Pos	Neg		Pos	Neg
(R) Foraminal Compression:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(R) Kemps':	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(L) Foraminal Compression:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(L) Kemps':	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(R) Shoulder Abduction:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(R) Straight Leg Raise:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(L) Shoulder Abduction:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(L) Straight Leg Raise:	<input checked="" type="checkbox"/>	<input type="checkbox"/>

## ASSESSMENT

Patient is: ☐ Stabilizing ☒ Progressing as Expected ☐ Overall Improvement ☐ Unchanged ☐ Temporary WorseningPatient states TX affords a degree of improved (MTG A.3): ☒ ADLs ☐ Positional Tolerance ☒ Mobility ☐ Strength ☐ Endurance

## TREATMENT/PLAN

☐ 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

☐ NMR (97112) - ☐ Proprioception/Activation ☐ Positional Release/Balance ☐ Deltoid ☐ Supra/infraspinatus ☐ ITB ☐ Hamstring

☒ Continue Prescribed TX Plan TX Frequency: 2 x weekly ☐ PRN ☐ MMI Patient/Released from Care

Doctors Notes: Less pelvic spasm noted today. Some right and left arm paresthesias (more right) as well as some leg paresthesias (more left). EMGs necessary to rule radiculopathy and or need for other evaluation.

Patient Tolerated Treatment well: ☒ Yes ☐ NoDr. MP☒ Scan☒ Posted

Billed \_\_\_\_\_



Patient Name: ~~REDACTED~~

D/A: 8/17/22

Date of Service: 3/10/23

DX: (1) M50.120 Initial Exam: 9/16/22  
(2) M54.12 Re-Exam: 2/22/23  
(3) M51.16 Ins Co: CHUBB  
(4) M54.14 Claim #: 092022026731

Patient Working: ☐ Yes ☒ No

☐ Patient, Dr, Staff all masked. Tx rooms  
sanitized prior to each patient. Masks offered/  
available for all. Covid 19 symptomology/  
possible exposure/ vaccination education  
discussed.

Additional Remarks: \_\_\_\_\_

### SUBJECTIVE COMPLAINTS

**Pain Intensity :**

	No Pain	Distressing Pain						Unbearable Pain			
	0	1	2	3	4	5	6	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
Sacro-Pelvis:	0	1	2	3	4	5	6	7	8	9	10

Provocative Activities: ☒ Sitting ☒ Standing ☒ Walking ☒ Negotiating Stairs ☒ Bending ☒ Lifting ☒ Pulling/Pushing

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:

	Spasm	Restricted ROM	Tenderness	Segmental Dysfunction/VSC	CMT Site
High Cervical:	4-5	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Mid Cervical:	4-5	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Cerv-thoracic:	4-5	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Thoracic:	5	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Thor-lumbar:	4-5	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Lumbar:	5	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Lumbo-sacral:	5	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Pelvic/SI Joint:	4-5	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

#### Orthopedic/Provocative Tests:

	Pos	Neg		Pos	Neg
(R) Foraminal Compression:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(R) Kemps':	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(L) Foraminal Compression:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(L) Kemps':	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(R) Shoulder Abduction:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(R) Straight Leg Raise:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(L) Shoulder Abduction:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(L) Straight Leg Raise:	<input checked="" type="checkbox"/>	<input type="checkbox"/>

### 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: \_\_\_\_\_ ☐ 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  
☐ NMR (97112) - ☐ Proprioception/Activation ☐ Positional Release/Balance ☐ Deltoid ☐ Supra/infraspinatus ☐ ITB ☐ Hamstring

☒ Continue Prescribed TX Plan TX Frequency: 2x weekly ☐ PRN ☐ MMI Patient/Released from Care

Doctors Notes: Lessening lower cervical spasm noted today

Patient Tolerated Treatment well: ☒ Yes ☐ No

Dr. 

## DAILY S.O.A.P. NOTES

Patient Name: XXXXXXXXXX

D/A: 8/17/22

Date of Service: 3/13/23

DX: (1) M50.120 Initial Exam: 9/16/22  
 (2) M54.12 Re-Exam: 2/22/23  
 (3) M51.16 Ins Co: CHUBB  
 (4) M54.14 Claim #: 092022026731

Patient Working: ☐ Yes ☒ No

☒ Patient, Dr, Staff all masked. Tx rooms  
 sanitized prior to each patient. Masks offered/  
 available for all. Covid 19 symptomology/  
 possible exposure/ vaccination education  
 discussed.

Additional Remarks: \_\_\_\_\_

SUBJECTIVE COMPLAINTS

**Pain Intensity :** No Pain Distressing Pain Unbearable Pain

Cervical:	0	1	2	3	4	5	6	8	9	10
Thoracic:	0	1	2	3	4	5	6	8	9	10
Lumbar:	0	1	2	3	4	5	6	8	9	10
Sacro-Pelvis:	0	1	2	3	4	5	6	8	9	10

Provocative Activities: ☒ Sitting ☒ Standing ☒ Walking ☐ Negotiating Stairs ☒ Bending ☒ Lifting ☒ Pulling/Pushing

Additional Complaints: \_\_\_\_\_

Radicular/Paresthesias:

☒ R ☐ L Upper Extremity  
☒ R ☐ L Shoulder/Scapular  
☐ R ☒ L Lower Extremity  
☐ R ☒ L Buttocks/Hip

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:	<input checked="" type="checkbox"/> Spasm <u>4-5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Mid Cervical:	<input checked="" type="checkbox"/> Spasm <u>4-5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Cerv-thoracic:	<input checked="" type="checkbox"/> Spasm <u>4-5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Thoracic:	<input checked="" type="checkbox"/> Spasm <u>5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Thor-lumbar:	<input checked="" type="checkbox"/> Spasm <u>4-5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Lumbar:	<input checked="" type="checkbox"/> Spasm <u>5</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Lumbo-sacral:	<input checked="" type="checkbox"/> Spasm <u>5-7</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site
Pelvic/SI Joint:	<input checked="" type="checkbox"/> Spasm <u>5-7</u>	<input checked="" type="checkbox"/> Restricted ROM	<input checked="" type="checkbox"/> Tenderness	<input type="checkbox"/> Segmental Dysfunction/VSC	<input checked="" type="checkbox"/> CMT Site

**Orthopedic/Provocative Tests:**

	Pos	Neg
(R) Foraminal Compression:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(L) Foraminal Compression:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(R) Shoulder Abduction:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(L) Shoulder Abduction:	<input checked="" type="checkbox"/>	<input type="checkbox"/>

	Pos	Neg
(R) Kemps':	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(L) Kemps':	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(R) Straight Leg Raise:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(L) Straight Leg Raise:	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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: \_\_\_\_\_ ☐ CMT (98940) ☒ CMT (98941) ☒ Massage-Spasm Sites (97124) ☐ EMS (97014)  
☒ Thera. Ex(97110) ☒ Paraspinal Strengthen/Activation ☒ Dynamic Spinal Ext/Stab. ☐ Isokinetic Exercises ☐ PROM/PROM/Stretching  
 Therapeutic Exercise Regions: ☒ Cervical ☒ Lumbar ☐ Thoracic  
☐ NMR (97112) - ☐ Proprioception/Activation ☐ Positional Release/Balance ☐ Deltoid ☐ Supra/infraspinatus ☐ ITB ☐ Hamstring

☒ Continue Prescribed TX Plan TX Frequency: 2 x weekly ☐ PRN ☐ MMI Patient/Released from Care

Doctors Notes: less sacral spasm noted TodayPatient Tolerated Treatment well: ☒ Yes ☐ 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: 3/15/23

RE: ~~CONFIDENTIAL~~  
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 Haggerty, DC