

After End of the session

1. Mode of Exercise Active Passive

2. Red Flags (tick if observed during/after session)

- Severe / unexpected pain increase
- Neurological symptoms (numbness, weakness, bladder/bowel issues)
- Dizziness / loss of consciousness
- Shortness of breath / chest pain
- Severe fever / Cold
- Bed sore(s) noticed
- Swelling
- Non-cooperative behaviour
- Poor hygiene issues
- Vomiting
- Diarrhea
- Any other concerning signs: _____

3. Home Exercise Program Assigned: Yes No

4. Modalities: Yes No

(if "yes")

list of modalities: 1.TENS, 2.IFT, 3.USD, 4.WAX, 5.ICE 6.HOT
7.Weights 8.Band

Targeted Area:-----