

# VISIT NOTE

DATE OF VISIT	LOCATION OF VISIT
02/24/2025	In-Office

DURATION OF VISIT	CURRENT ONCOLOGIST
45 minutes	Amanda Wilson, MD

## PATIENT DEMOGRAPHIC INFORMATION

PATIENT NAME	DATE OF BIRTH
Sarah Johnson	1965-05-12

PRESENTING PROBLEM
Patient presents with chronic lower back pain following lumbar surgery performed 6 months ago. Reports persistent pain, decreased mobility, and difficulty with activities of daily living.

VISIT CONTENT
Patient reports pain level of 6/10, worse with prolonged sitting and standing. Previous physical therapy has provided minimal relief. Patient expresses interest in alternative therapeutic approaches. Physical examination reveals decreased range of motion in lumbar spine, muscle guarding, and tenderness to palpation along L4-L5.

## MEDICAL PLAN

Start aquatic therapy - therapeutic procedure (15 min sessions), one treatment area for lumbar region. Aquatic therapeutic exercises to reduce spinal loading while improving strength and mobility.

Prescribed NSAIDs for pain management.

Home exercise program provided to supplement aquatic therapy sessions.

## DIAGNOSTIC IMPRESSIONS

Post-surgical lumbar pain syndrome (M96.1)

Lumbar muscle spasm (M62.830)

## ONCOLOGIST'S OBSERVATIONS

Patient demonstrates motivation for recovery but is frustrated with slow progress. Shows appropriate affect and good understanding of treatment plan. No signs of depression or catastrophizing behavior.

## PATIENT RESPONSE

Patient is enthusiastic about trying aquatic therapy and committed to attending all scheduled sessions. Expressed relief at having new treatment options to explore.

## RETURN TO CLINIC

In 4 weeks for re-evaluation and assessment of progress with aquatic therapy program.

#### PLAN FOR NEXT VISIT

Review effectiveness of aquatic therapy program. Assess pain levels and functional improvement. Adjust treatment plan as needed based on response to therapy.