

CC Acupuncture PC

PATIENT: ZHENG, ZENGGUI Gender: Male
 DOB: 03/08/1957 AGE AS OF 02/04/2026: 68y

Subjective:

Follow up visit
 Patient reports: there is improvement of symptom(s) because of more energy level throughout the day .
 Patient still c/o pin & needles pain in bilateral shoulder area without radiation, associated with muscles soreness (scale as 50%-60%), impaired performing ADL's with moderate to severe difficulty of put on/take off the clothes, reach to back to unzip and moderate to severe difficulty of put on/take off the clothes, reach to back to unzip.

Pain Scale: 5 /10

Pain frequency: Frequent (symptoms occur between 51% and 75% of the time)

Objective: **Inspection:**weak muscles and dry skin without luster

Muscles Testing:

Tightness muscles noted along greater tuberosity, AC joint, rhomboids, supraspinatus, triceps short head

Grading Scale: mild to moderate

Tenderness muscles noted along upper trapezius, lesser tuberosity, AC joint, middle deltoid, bicep long head, supraspinatus

Grading Scale: (+3) = Patient complains of considerable tenderness and withdraws momentarily in response to the test pressure.

Muscles spasm noted along rhomboids, deltoid ant fibres, supraspinatus, triceps short head

Frequency Grading Scale: (+3)=>1 but < 10 spontaneous spasms per hour.

Right Shoulder Muscles Strength and Joint ROM

3+/5 Abduction: 120 degree(moderate)

3+/5 Horizontal Adduction: 15 degree (moderate)

3+/5 Flexion :110 degree(moderate)

3+/5 Extension : 25 Degrees(moderate)

4-/5 External rotation : 60 Degrees(moderate)

4-/5 Internal rotation : 60 Degrees(moderate)

tongue

thin white coat

pulse

string-taut

Assessment:

The patient continues treatment for in bilateral shoulder area area today. The patient's general condition is good, compared with last treatment, the patient presents with improvement of symptom(s). The patient has decreased muscles soreness sensation, physical finding has reduced local muscles tightness. Patient tolerated acupuncture session with positive verbal response. No adverse side effect post treatment.

Current patient still has Qi Stagnation, Blood Stasis in local meridian that cause the pain.

Plan: Select Needle Size :36#x0.5" , 34#x1" ,30# x1.5"

Daily acupuncture treatment for shoulder - Personal one on one contact with the patient (Total Operation Time: 15 mins)

Back Points: (15 mins) - personal one on one contact with the patient

1. Greeting patient, Review of the chart, Routine examination of the patient current condition, washing hands, setting up the clean field, selecting acupuncture needle size, selecting location, marking and cleaning the points, Initial Acupuncture needle inserted without electrical stimulation BL10, LI16, SI14, SJ10

Removing and properly disposing of needle

Post treatment service and education patient about precautions at home after

09/29/2025

treatment.
Documentation

Today's treatment principles:
continue to be emphasize on activating Blood circulation to dissipate blood stagnant to speed up the recovery, soothe the tendon.

Diagnosis Code: (1) Pain in right shoulder(M25.511)

Procedure Code: (1) ACUP 1/> WO ESTIM 1ST 15 MIN(97810)

Subjective:

Follow up visit

Patient reports: there is improvement of symptom(s) because of more energy level throughout the day .

Patient still c/o pin & needles pain in bilateral shoulder area without radiation, associated with muscles soreness (scale as 70%), impaired performing ADL's with moderate to severe difficulty of put on/take off the clothes, reach to back to unzip and moderate to severe difficulty of put on/take off the clothes, reach to back to unzip.

Pain Scale: 5 /10

Pain frequency: Frequent (symptoms occur between 51% and 75% of the time)

Objective: **Inspection:**weak muscles and dry skin without luster

Muscles Testing:

Tightness muscles noted along greater tuberosity, AC joint, rhomboids, supraspinatus, triceps short head

Grading Scale: moderate

Tenderness muscles noted along upper trapezius, lesser tuberosity, AC joint, middle deltoid, bicep long head, supraspinatus

Grading Scale: (+3) = Patient complains of considerable tenderness and withdraws momentarily in response to the test pressure.

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Patient still c/o pin & needles pain in bilateral shoulder area without radiation, associated with muscles soreness (scale as 70%), impaired performing ADL's with moderate to severe difficulty of put on/take off the clothes, reach to back to unzip and moderate to severe difficulty of put on/take off the clothes, reach to back to unzip.

Pain Scale: 6-5 /10

Pain frequency: Frequent (symptoms occur between 51% and 75% of the time)

Objective: **Inspection:**weak muscles and dry skin without luster

Muscles Testing:

Tightness muscles noted along greater tuberosity, AC joint, rhomboids, supraspinatus, triceps short head

Grading Scale: moderate

Tenderness muscles noted along upper trapezius, lesser tuberosity, AC joint, middle deltoid, bicep long head, supraspinatus

Grading Scale: (+4) = Patient complains of severe tenderness, withdraws immediately in response to test pressure, and is unable to bear sustained pressure.

Muscles spasm noted along rhomboids, deltoid ant fibres, supraspinatus, triceps short head

Frequency Grading Scale: (+3)=>1 but < 10 spontaneous spasms per hour.

Right Shoulder Muscles Strength and Joint ROM

3+/5 Abduction: 120 degree(moderate)

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Assessment:

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Current patient still has Qi Stagnation, Blood Stasis in local meridian that cause the pain.

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09/15/2025

Removing and properly disposing of needle
 Post treatment service and education patient about precautions at home after treatment.
 Documentation

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Pain Scale: 7-6 /10

Pain frequency: Frequent (symptoms occur between 51% and 75% of the time)

Objective: **Inspection:**weak muscles and dry skin without luster

Muscles Testing:

Tightness muscles noted along greater tuberosity, AC joint, rhomboids, supraspinatus, triceps short head

Grading Scale: moderate to severe

Tenderness muscles noted along upper trapezius, lesser tuberosity, AC joint, middle deltoid, bicep long head, supraspinatus

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Assessment:

The patient continues treatment for in bilateral shoulder area area today.

The patient's general condition is good, compared with last treatment, the patient presents with no change. The patient has remained the same as last time visit, physical finding has remained the same last visit. Patient tolerated acupuncture session with positive verbal response. No adverse side effect post treatment.

Current patient still has Qi Stagnation, Blood Stasis in local meridian that cause the pain.

Plan: Select Needle Size :36#x0.5" , 34#x1" ,30# x1.5"

Daily acupuncture treatment for shoulder - Personal one on one contact with the patient (Total Operation Time: 15 mins)

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09/12/2025

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Subjective: INITIAL EVALUATION

Patient c/o Chronic pin & needles pain in right-shoulder area (without radiation) for 8 year(s) got worse in recent 1-2 week(s) associated with muscles soreness (scale as 70%) because of age related/degenerative changes, over used due to nature of work.

The pain is aggravated by internal rotation, sleep to the side, impaired performing ADL's with moderate to severe difficulty of put on/take off the clothes, reach to back to unzip. Stretching can temporarily relieve the pain slightly but limited.

Patient has decrease outside activity, the pain did not **improved after a week** which promoted the patient to seek acupuncture and oriental medicine intervention.

Patient also complaints of chronic pain on the lower back, hip area comes and goes, which is less severe compared to the Right -shoulder area pain.

Pain Scale: Worst: 7 ; Best: 6 ; Current: 7-6

Pain Frequency: Frequent (symptoms occur between 51% and 75% of the time)
 Walking aid :none

Medical history/Contraindication or Precision: Osteoporosis, stomach trouble, Cholesterol

Objective: Inspection: weak muscles and dry skin without luster

Muscles Testing:

Tightness muscles noted along greater tuberosity, AC joint, rhomboids, supraspinatus, triceps short head
 Grading Scale: moderate to severe

Tenderness muscles noted along upper trapezius, lesser tuberosity, AC joint, middle deltoid, bicep long head, supraspinatus

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Right Shoulder Muscles Strength and Joint ROM

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Assessment: TCM Dx:

Right - shoulder area pain due to Qi Stagnation, Blood Stasis in local meridian, but patient also has Qi & Blood Deficiency in the general.

Today's TCM treatment principles:

emphasize on activating Blood circulation to dissipate blood stagnant and harmonize healthy qi and to expel pathogen factor to promote balance in order to to reduce stagnation and improve circulation.

Acupuncture Eval was done today Right -shoulder area

09/03/2025

Plan: Initial Evaluation - Personal one on one contact with the patient (total **15-20 mins**)

1. Greeting patient.
2. Detail explanation from patient of past medical history and current symptom.
3. Initial evaluation examination of the patient current condition.
4. Explanation with patient for medical decision/treatment plan.

Short Term Goal (RELIEF TREATMENT FREQUENCY: 12 treatments in 5-6 weeks):
Decrease Pain Scale to 4.
Decrease soreness sensation Scale to (50%)
Decrease Muscles Tightness to moderate
Decrease Muscles Tenderness to Grade 3
Decrease Muscles Spasms to Grade 2
Increase Muscles Strength to 4

Long Term Goal (ADDITIONAL MAINTENANCE & SUPPORTING TREATMENTS FREQUENCY: 8 treatments in 5-6 weeks):
Decrease Pain Scale to 2
Decrease soreness sensation Scale to (30%)
Decrease Muscles Tightness to mild-moderate
Decrease Muscles Tenderness to Grade 2
Decrease Muscles Spasms to Grade 1
Increase Muscles Strength to 4+
Increase ROM 60%
Decrease impaired Activities of Daily Living to mild-moderate.

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