

## CC Acupuncture PC

PATIENT: HUANG, YI F Gender: Male  
DOB: 11/09/1953 AGE AS OF 02/04/2026: 72y

## Subjective:

Follow up visit

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

Patient still c/o Dull, Aching pain in left knee area without radiation , associated with muscles weakness (scale as 40%), impaired performing ADL's with moderate to severe difficulty Going up and down stairs, Bending over to wear/tie a shoe, Rising from a chair.

**Pain Scale: 4 /10**

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

## Objective: Muscles Testing:

Tightness muscles noted along Quadratus femoris, Iliotibial Band ITB, Rectus Femoris

Grading Scale: mild to moderate

Tenderness muscle noted along Gastrocnemius muscle, Hamstrings muscle group, Tibialis Post/ Anterior, Plantar Fasciitis, Intrinsic Foot Muscle group

Tenderness Scale: (+2) = There is mild tenderness with grimace and flinch to moderate palpation .

Muscles spasm noted along Quadratus femoris, Adductor longus/ brev/ magnus, Iliotibial Band ITB, Rectus Femoris

Frequency Grading Scale: (+2)=Occasional spontaneous spasms and easily induced spasms.

Left Knee Muscles Strength and Joint ROM:

4/5 Flexion(fully bent): 100 Degrees(moderate)

4/5 Extension(fully straight): 0(normal)

**Inspection:** local skin no damage or rash

08/18/2025

tongue  
thin white coat  
pulse  
string-taut

## Assessment:

The patient continues treatment for along left knee area today.

The patient's general condition is fair, compared with last treatment, the patient presents with improvement of symptom(s). The patient has decreased muscles weakness, physical finding has remained the same last visit. Patient tolerated acupuncture treatment 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 : 34#x1" ,30# x1.5",30# x2"

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

Front 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 for front points without electrical stimulation ST35, SP3, KD3, XI YAN

Removing and properly disposing of needles

Post treatment service and education patient about precautions at home after treatment.

Documentation

Today's treatment principles:

focus on activating Blood circulation to dissipate blood stagnant to speed up the recovery, soothe the tendon.

Diagnosis Code: (1) Pain in left knee(M25.562)

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 Dull, Aching pain in left knee area without radiation , associated with muscles weakness (scale as 40%-50%), impaired performing ADL's with moderate to severe difficulty Going up and down stairs, Bending over to wear/tie a shoe, Rising from a chair.

**Pain Scale: 4 /10**

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

**Objective: Muscles Testing:**

Tightness muscles noted along Quadratus femoris, Iliotibial Band ITB, Rectus Femoris

Grading Scale: mild to moderate

Tenderness muscle noted along Gastronemius muscle, Hamstrings muscle group, Tibialis Post/ Anterior, Plantar Fasciitis, Intrinsic Foot Muscle group

Tenderness Scale: (+2) = There is mild tenderness with grimace and flinch to moderate palpation .

Muscles spasm noted along Quadratus femoris, Adductor longus/ brev/ magnus, Iliotibial Band ITB, Rectus Femoris

Frequency Grading Scale: (+2)=Occasional spontaneous spasms and easily induced spasms.

Left Knee Muscles Strength and Joint ROM:

4/5 Flexion(fully bent): 100 Degrees(moderate)

4/5 Extension(fully straight): 0(normal)

**Inspection:** local skin no damage or rash

08/14/2025

tongue  
thin white coat  
pulse  
string-taut

**Assessment:**

The patient continues treatment for along left knee area today.

The patient's general condition is fair, compared with last treatment, the patient presents with improvement of symptom(s). The patient has decreased pain duration, physical finding has reduced local muscles spasms. Patient tolerated acupuncture treatment 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 : 34#x1" ,30# x1.5",30# x2"

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

Front 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 for front points without electrical stimulation ST35, SP3, KD3, XI YAN

Removing and properly disposing of needles

Post treatment service and education patient about precautions at home after treatment.

Documentation

Today's treatment principles:

focus on activating Blood circulation to dissipate blood stagnant to speed up the recovery, soothe the tendon.

Diagnosis Code: (1) Pain in left knee(M25.562)  
 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 Dull, Aching pain in left knee area without radiation , associated with muscles weakness (scale as 40%-50%), impaired performing ADL's with moderate to severe difficulty Going up and down stairs, Bending over to wear/tie a shoe, Rising from a chair.

**Pain Scale: 5 /10**

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

Objective: Muscles Testing:

Tightness muscles noted along Quadratus femoris, Iliotibial Band ITB, Rectus Femoris  
 Grading Scale: mild to moderate

Tenderness muscle noted along Gastronemius muscle, Hamstrings muscle group, Tibialis Post/ Anterior, Plantar Fasciitis, Intrinsic Foot Muscle group

Tenderness Scale: (+2) = There is mild tenderness with grimace and flinch to moderate palpation .

Muscles spasm noted along Quadratus femoris, Adductor longus/ brevis/ magnus, Iliotibial Band ITB, Rectus Femoris  
 Frequency Grading Scale: (+3)=>1 but < 10 spontaneous spasms per hour.

Left Knee Muscles Strength and Joint ROM:

4/5 Flexion(fully bent): 100 Degrees(moderate)  
 4/5 Extension(fully straight): 0(normal)

**Inspection:** local skin no damage or rash

08/13/2025

tongue  
 thin white coat  
 pulse  
 string-taut

Assessment:

The patient continues treatment for along left knee area today.  
 The patient's general condition is fair, compared with last treatment, the patient presents with improvement of symptom(s). The patient has decreased muscles weakness, physical finding has reduced local muscles tenderness. Patient tolerated acupuncture treatment 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 : 34#x1" ,30# x1.5" ,30# x2"  
 Daily acupuncture treatment for knee - Personal one on one contact with the patient (Total Operation Time: 15 mins)  
 Front 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 for front points without electrical stimulation ST35, SP3, KD3, XI YAN

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

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

Diagnosis Code: (1) Pain in left knee(M25.562)  
 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 Dull, Aching pain in left knee area without radiation , associated with muscles weakness (scale as 50%), impaired performing ADL's with moderate to severe difficulty Going up and down stairs, Bending over to wear/tie a shoe, Rising from a chair.

**Pain Scale: 5 /10****Pain frequency:** Frequent (symptoms occur between 51% and 75% of the time)

## Objective: Muscles Testing:

Tightness muscles noted along Quadratus femoris, Iliotibial Band ITB, Rectus Femoris

Grading Scale: mild to moderate

Tenderness muscle noted along Gastronemius muscle, Hamstrings muscle group, Tibialis Post/ Anterior, Plantar Fasciitis, Intrinsic Foot Muscle group

Tenderness Scale: (+3) = There is severe tenderness with withdrawal .

Muscles spasm noted along Quadratus femoris, Adductor longus/ brevis/ magnus, Iliotibial Band ITB, Rectus Femoris

Frequency Grading Scale: (+3)= &gt;1 but &lt; 10 spontaneous spasms per hour.

Left Knee Muscles Strength and Joint ROM:

4/5 Flexion(fully bent): 100 Degrees(moderate)

4/5 Extension(fully straight): 0(normal)

**Inspection:** local skin no damage or rash

08/11/2025

tongue

thin white coat

pulse

string-taut

## Assessment:

The patient continues treatment for along left knee area today.

The patient's general condition is fair, compared with last treatment, the patient presents with improvement of symptom(s). The patient has decreased difficulty in performing ADLs, physical finding has reduced local muscles tightness. Patient tolerated acupuncture treatment 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 : 34#x1" ,30# x1.5",30# x2"

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

Front 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 for front points without electrical stimulation ST35, SP3, KD3, XI YAN

Removing and properly disposing of needles

Post treatment service and education patient about precautions at home after treatment.

Documentation

Today's treatment principles:

focus on activating Blood circulation to dissipate blood stagnant to speed up the recovery, soothe the tendon.

Diagnosis Code: (1) Pain in left knee(M25.562)

Procedure Code: (1) ACUP 1/&gt; 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 Dull, Aching pain in left knee area without radiation , associated with muscles weakness (scale as 50%), impaired performing ADL's with moderate to severe difficulty Going up and down stairs, Bending over to wear/tie a shoe, Rising from a chair.

**Pain Scale: 5 /10**

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

Objective: Muscles Testing:  
Tightness muscles noted along Quadratus femoris, Iliotibial Band ITB, Rectus Femoris  
Grading Scale: moderate

Tenderness muscle noted along Gastronemius muscle, Hamstrings muscle group, Tibialis Post/ Anterior, Plantar Fasciitis, Intrinsic Foot Muscle group

Tenderness Scale: (+3) = There is severe tenderness with withdrawal .

Muscles spasm noted along Quadratus femoris, Adductor longus/ brev/ magnus, Iliotibial Band ITB, Rectus Femoris  
Frequency Grading Scale: (+3)=>1 but < 10 spontaneous spasms per hour.

Left Knee Muscles Strength and Joint ROM:

4/5 Flexion(fully bent): 100 Degrees(moderate)  
4/5 Extension(fully straight): 0(normal)

**Inspection:** local skin no damage or rash

08/06/2025

tongue  
thin white coat  
pulse  
string-taut

Assessment: The patient continues treatment for along left knee area today.  
The patient's general condition is fair, compared with last treatment, the patient presents with improvement of symptom(s). The patient has decreased pain, physical finding has reduced joint ROM limitation. Patient tolerated acupuncture treatment 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 : 34#x1" ,30# x1.5",30# x2"  
Daily acupuncture treatment for knee - Personal one on one contact with the patient (Total Operation Time: 15 mins)  
Front 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 for front points without electrical stimulation ST35, SP3, KD3, XI YAN

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

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

Diagnosis Code: (1) Pain in left knee(M25.562)  
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 Dull, Aching pain in left knee area without radiation , associated with muscles weakness (scale as 50%), impaired performing ADL's with moderate to severe difficulty Going up and down stairs, Bending over to wear/tie a shoe, Rising from a chair.

**Pain Scale: 6 /10****Pain frequency:** Frequent (symptoms occur between 51% and 75% of the time)**Objective:** Muscles Testing:

Tightness muscles noted along Quadratus femoris, Iliotibial Band ITB, Rectus Femoris

Grading Scale: moderate

Tenderness muscle noted along Gastronemius muscle, Hamstrings muscle group, Tibialis Post/ Anterior, Plantar Fasciitis, Intrinsic Foot Muscle group

Tenderness Scale: (+3) = There is severe tenderness with withdrawal .

Muscles spasm noted along Quadratus femoris, Adductor longus/ brev/ magnus, Iliotibial Band ITB, Rectus Femoris

Frequency Grading Scale: (+3)=&gt;1 but &lt; 10 spontaneous spasms per hour.

Left Knee Muscles Strength and Joint ROM:

4/5 Flexion(fully bent): 95 Degrees(moderate)

4/5 Extension(fully straight): 0(normal)

**Inspection:** local skin no damage or rash

08/04/2025

tongue  
thin white coat  
pulse  
string-taut**Assessment:**

The patient continues treatment for along left knee area today.

The patient's general condition is fair, compared with last treatment, the patient presents with improvement of symptom(s). The patient has decreased muscles weakness, physical finding has reduced local muscles tenderness. Patient tolerated acupuncture treatment 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 : 34#x1" ,30# x1.5",30# x2"

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

Front 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 for front points without electrical stimulation ST35, SP3, KD3, XI YAN

Removing and properly disposing of needles

Post treatment service and education patient about precautions at home after treatment.

Documentation

Today's treatment principles:

focus on activating Blood circulation to dissipate blood stagnant to speed up the recovery, soothe the tendon.

**Diagnosis Code:** (1) Pain in left knee(M25.562)**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 Dull, Aching pain in left knee area without radiation , associated with muscles weakness (scale as 50%-60%), impaired performing ADL's with moderate to severe difficulty Going up and down stairs, Bending over to wear/tie a shoe, Rising from a chair.

**Pain Scale: 6 /10****Pain frequency:** Frequent (symptoms occur between 51% and 75% of the time)**Objective:** Muscles Testing:

Tightness muscles noted along Quadratus femoris, Iliotibial Band ITB, Rectus

Femoris  
Grading Scale: moderate

Tenderness muscle noted along Gastronemius muscle, Hamstrings muscle group, Tibialis Post/ Anterior, Plantar Fasciitis, Intrinsic Foot Muscle group

Tenderness Scale: (+4) = There is severe tenderness and withdrawal response from the patient when there is noxious stimulus .

Muscles spasm noted along Quadratus femoris, Adductor longus/ brev/ magnus, Iliotibial Band ITB, Rectus Femoris  
Frequency Grading Scale: (+3)= >1 but < 10 spontaneous spasms per hour.

Left Knee Muscles Strength and Joint ROM:

4/5 Flexion(fully bent): 95 Degrees(moderate)  
4/5 Extension(fully straight): 0(normal)

**Inspection:** local skin no damage or rash

07/31/2025

tongue  
thin white coat  
pulse  
string-taut

Assessment:

The patient continues treatment for along left knee area today.  
The patient's general condition is fair, compared with last treatment, the patient presents with improvement of symptom(s). The patient has decreased pain duration, physical finding has reduced local muscles tightness. Patient tolerated acupuncture treatment 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 : 34#x1" ,30# x1.5",30# x2"  
Daily acupuncture treatment for knee - Personal one on one contact with the patient (Total Operation Time: 15 mins)  
Front 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 for front points without electrical stimulation ST35, SP3, KD3, XI YAN

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

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

Diagnosis Code: (1) Pain in left knee(M25.562)

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 Dull, Aching pain in left knee area without radiation , associated with muscles weakness (scale as 50%-60%), impaired performing ADL's with moderate to severe difficulty Going up and down stairs, Bending over to wear/tie a shoe, Rising from a chair.

**Pain Scale: 7 /10**

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

Objective: Muscles Testing:

Tightness muscles noted along Quadratus femoris, Iliotibial Band ITB, Rectus Femoris  
Grading Scale: moderate to severe

Tenderness muscle noted along Gastronemius muscle, Hamstrings muscle group,

Tibialis Post/ Anterior, Plantar Fasciitis, Intrinsic Foot Muscle group

Tenderness Scale: (+4) = There is severe tenderness and withdrawal response from the patient when there is noxious stimulus .

Muscles spasm noted along Quadratus femoris, Adductor longus/ brev/ magnus, Iliotibial Band ITB, Rectus Femoris  
Frequency Grading Scale: (+3)= >1 but < 10 spontaneous spasms per hour.

Left Knee Muscles Strength and Joint ROM:

4/5 Flexion(fully bent): 95 Degrees(moderate)

4/5 Extension(fully straight): 0(normal)

**Inspection:** local skin no damage or rash

07/30/2025

tongue  
thin white coat  
pulse  
string-taut

Assessment:

The patient continues treatment for along left knee area today.

The patient's general condition is fair, compared with last treatment, the patient presents with improvement of symptom(s). The patient has decreased muscles weakness, physical finding has increased muscles strength. Patient tolerated acupuncture treatment 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 : 34#x1" ,30# x1.5",30# x2"

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

Front 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 for front points without electrical stimulation ST35, SP3, KD3, XI YAN

Removing and properly disposing of needles

Post treatment service and education patient about precautions at home after treatment.

Documentation

Today's treatment principles:

focus on activating Blood circulation to dissipate blood stagnant to speed up the recovery, soothe the tendon.

Diagnosis Code: (1) Pain in left knee(M25.562)

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 Dull, Aching pain in left knee area without radiation , associated with muscles weakness (scale as 70%), impaired performing ADL's with moderate to severe difficulty Going up and down stairs, Bending over to wear/tie a shoe, Rising from a chair.

**Pain Scale: 7 /10**

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

Objective: Muscles Testing:

Tightness muscles noted along Quadratus femoris, Iliotibial Band ITB, Rectus Femoris

Grading Scale: moderate to severe

Tenderness muscle noted along Gastrocnemius muscle, Hamstrings muscle group, Tibialis Post/ Anterior, Plantar Fasciitis, Intrinsic Foot Muscle group

Tenderness Scale: (+4) = There is severe tenderness and withdrawal response from the patient when there is noxious stimulus .



Muscles spasm noted along Quadratus femoris, Adductor longus/ brev/ magnus, Iliotibial Band ITB, Rectus Femoris  
Frequency Grading Scale: (+3)=>1 but < 10 spontaneous spasms per hour.

Left Knee Muscles Strength and Joint ROM:

4/5 Flexion(fully bent): 95 Degrees(moderate)  
4-/5 Extension(fully straight): 0(normal)

**Inspection:** local skin no damage or rash

07/28/2025

tongue  
thin white coat  
pulse  
string-taut

Assessment:

The patient continues treatment for along left knee area today.  
The patient's general condition is fair, compared with last treatment, the patient presents with improvement of symptom(s). The patient has decreased muscles weakness, physical finding has increased muscles strength. Patient tolerated acupuncture treatment 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 : 34#x1" ,30# x1.5",30# x2"  
Daily acupuncture treatment for knee - Personal one on one contact with the patient (Total Operation Time: 15 mins)  
Front 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 for front points without electrical stimulation ST35, SP3, KD3, XI YAN

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

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

Diagnosis Code: (1) Pain in left knee(M25.562)

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 Dull, Aching pain in left knee area without radiation , associated with muscles weakness (scale as 70%-80%), impaired performing ADL's with moderate to severe difficulty Going up and down stairs, Bending over to wear/tie a shoe, Rising from a chair.

**Pain Scale: 7 /10**

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

Objective: Muscles Testing:

Tightness muscles noted along Quadratus femoris, Iliotibial Band ITB, Rectus Femoris  
Grading Scale: moderate to severe

Tenderness muscle noted along Gastrocnemius muscle, Hamstrings muscle group, Tibialis Post/ Anterior, Plantar Fasciitis, Intrinsic Foot Muscle group

Tenderness Scale: (+4) = There is severe tenderness and withdrawal response from the patient when there is noxious stimulus .

Muscles spasm noted along Quadratus femoris, Adductor longus/ brev/ magnus, Iliotibial Band ITB, Rectus Femoris  
Frequency Grading Scale: (+3)=>1 but < 10 spontaneous spasms per hour.

Left Knee Muscles Strength and Joint ROM:

3+/5 Flexion(fully bent): 95 Degrees(moderate)  
3+/5 Extension(fully straight): 0(normal)

**Inspection:** local skin no damage or rash

07/24/2025

tongue  
thin white coat  
pulse  
string-taut

Assessment:

The patient continues treatment for along left knee area today.  
The patient's general condition is fair, compared with last treatment, the patient presents with improvement of symptom(s). The patient has decreased pain, physical finding has reduced joint ROM limitation. Patient tolerated acupuncture treatment 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 : 34#x1" ,30# x1.5",30# x2"  
Daily acupuncture treatment for knee - Personal one on one contact with the patient (Total Operation Time: 15 mins)  
Front 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 for front points without electrical stimulation ST35, SP3, KD3, XI YAN

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

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

Diagnosis Code: (1) Pain in left knee(M25.562)  
Procedure Code: (1) ACUP 1/> WO ESTIM 1ST 15 MIN(97810)