Chart Notes David Martinez

Capitol Rehab Inc 801 N Quincy St Ste 130 Arlington, VA 222031708 Phone: (703) 527-5492 Fax: (703) 527-5624

Patient: Martinez, David Acct #: 60255 DOB: 04/19/1993

Ins Co: Pol #: Insured ID:

Date 05/19/2021

Provider: Jared Hatch, D.C. *** continued from previous page ***

ASSESSMENT:

David is expected to make some progress with follow up appointments. There has been nothing noted as contraindications to chiropractic treatment. Based on his history and examination, it is reasonable to believe that his recovery may take some time.

DIAGNOSIS:

Upon consideration of the information available I have diagnosed David Martinez with: (M54.5) Low back pain

Plan:

- EMS Unattended: low volt EMS applied to left and right (equal) lumbo-sacral region(s) to decrease spasm during relief phase treatment for 15 minutes at a frequency of 2 visits per week for next 3 weeks.

- Manual Therapy: myofascial release performed on the following muscle: right sacroiliac, right posterior pelvis/hip, left sacroiliac and left posterior pelvis/hip bilateral to decrease myofascial adhesions during relief phase of treatment for 15 minutes at a frequency of 2 visits per week for next 3 weeks.

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