

MyoVision

Office Information:

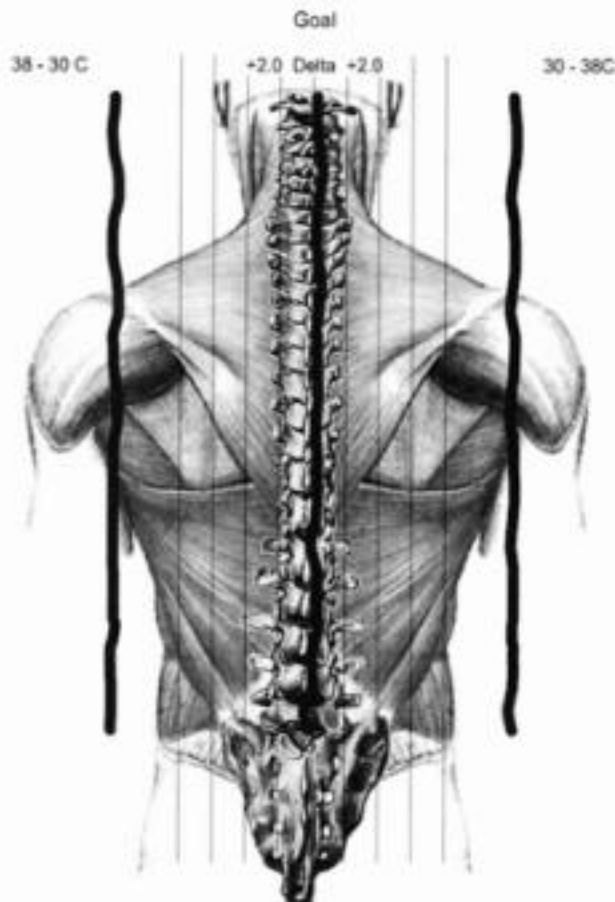
Chiropractic

A

Patient Information:

Patient:

Exam Date: 05:06:28 PM



Fossa = N/A

Your doctor can explain how thermography data helps in evaluating your spinal health!

Paraspinal thermography measures the difference in skin temperature between the left and right sides of your spine. your doctor uses this important physiological data to help determine the cause of any imbalance in skin temperature and to track your progress over time.

To Schedule Your Exam Call:

MyoVision ThermoVision Narrative

Deines Chiropractic

██████████ A ██████████
██████████
██████████
██████████ 05:06:28 PM

Paraspinal thermal imaging is an extremely sensitive and accepted method of analysis for the presence of abnormal autonomic neurophysiology (1,2). The data presented in the image is compared to literature-based normative values to determine the extent of neuropathophysiology (3,4,5). Any paraspinal thermal asymmetry of 0.5° C or above is indicative of abnormal nervous system functions (2,3,4,5). The higher the asymmetry, the greater the extent of neural dysfunction. In accordance with accepted thermographic protocol (6,7), a high-resolution paraspinal scan was performed on this patient from the level S1 to occiput. Approximately 144 infrared samples were taken for analysis. The data was digitally analyzed and found to contain Mild thermal asymmetries when compared to established normal values.

<u>Delta-T</u>	<u>Approx. Location from C0</u>	<u>Rating</u>
Right 0.4 C	1.93 cm -- C3	Mild
Right 0.4 C	2.57 cm -- C4	Mild
Right 0.3 C	3.21 cm -- C5	Mild
Right 0.3 C	3.86 cm -- C6	Mild

- (1) Clark RP. "Human Skin Temperature and its Relevance in Physiology and Clinical Assessment". In: Francis E, Ring J, Phillips B, et al, Recent Advances in Medical Thermology. ██████████
██████████ on Scientific Affairs. "AMA Council Report - Thermography in Neurological and Musculoskeletal Conditions". Thermology
(3) ██████████ D., et al. "Quantification of Thermal Asymmetry. Part 1: Normal Values and Reproducibility". J ██████████
(4) Feldman, F., Nickoloff, E. "Normal Thermographic Standards in the Cervical Spine and Upper Extremities". Skeletal Radiol 1984;12: ██████████
(5) Uematsu S. "Symmetry of the Skin Temperature Comparing One Side of the Body to the Other". Thermology ██████████
(6) Thermography Protocols - "International Thermographic Society" 1997.
(7) Thermography Protocols - ██████████ Infrared Imaging" 1997.

MyoVision Report of Findings

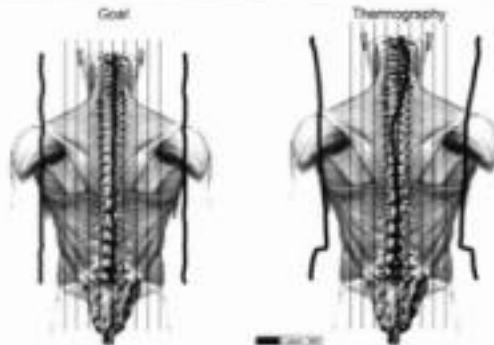
Chiropractic

05:06:28 PM

Spinal Motion (DYSKINESIA)

Muscle Balance (DYSPONESIS)

Abnormal Nervous Function (DYSAUTOMOMIA)



X-RAY Findings DEGENERATION PHASE: I II III IV

Recommendations for short term goals

Recommendation for care:

Re-exam dates:

Extended visit date:

Achievement report date:

Status:

Short term goal:

Quality of life issues:

Pol #:

Page 1 Of 4

Acct #: 8791

Pol #:

*** continued from previous page ***

Plan:

TREATMENT PLAN:

Shalee's treatment plan for this episode began on [REDACTED] and is projected to be completed by [REDACTED]

- Home/Self Care: [REDACTED] was instructed in home care recommendations that included: home cold pack issued today. She was instructed to ice for 20 minutes for pain, repeat after 60 minutes and discontinue after 3 hours

- **Chief Complaint:** posterior cervical (neck), upper thoracic and lumbar

- **Functional Deficit:** [REDACTED] reports personal care (washing, dressing, etc.) has become difficult due to some or all of the following: performing household chores when she does this more than 3 minutes

- **Short Term Tx Goal:** To increase her ability to perform the above to 30 minutes by the re-exam date within 30 days unless improvement warrants discharge sooner.

- Long Term Goal: Attain pre-condition/pre-injury status

- Primary Treatment: Diversified and Drop Table - Chiropractic Manipulative Therapy (CMT) (approx: 18 to 24 visits) to the cervical spinal region, lumbar spinal region, sacroiliac spinal region and thoracic spinal region C1, C7, T8, T12, left pelvis, right pelvis and L3 at a frequency and duration of 3 visits per week for next 4 weeks followed by a re-exam within 30 days.

- **Tx Effectiveness:** Overall effectiveness of treatment for this complaint will be evaluated by analyzing the Functional Rating Index (FRI) functional outcome assessment tool. The beginning score or percentage was 7 disability and the goal score or percentage is 10% or better.

- Advised

- Tx Effect: Examination performed without incident

- **Next Visit:** Patient advised continue with treatment plan as scheduled

Diagnosis

Segmental and somatic dysfunction of cervical region

M54.2: Cervicalgia

M99.04: Segmental and somatic dysfunction of sacral region

M99.02: Segmental and somatic dysfunction of thoracic region

Chart Notes

Deines Chiropractic
1821 S. [REDACTED]

[REDACTED]
[REDACTED]
[REDACTED]

[REDACTED] 8'

[REDACTED] D.C.

Subjective:

HISTORY:

Chief Complaint: an acute posterior cervical (neck), upper thoracic and lumbar complaint of unknown origin since [REDACTED]

Please see today's initial intake form for the family history, past history, and current illness. This form has been completed by the patient and has been reviewed. In addition, the chief complaint and it's relationship to the patient's case do warrant further care.

Objective:

[REDACTED] Manuever was positive bilaterally. This test can be done with the patient sitting or standing. The patient actively rotates the trunk against the examiner's counter pressure. Then the examiner passively rotates the shoulder. If either of these actions causes pain, the test is considered positive. Pain caused from the active test indicates a strain or sprain and pain from the passive test indicates a facet syndrome. This test was done bilaterally on this patient.

Radiographs:

- Rationale: Based upon the patient's history and examination, radiographs were ordered. As routine procedure the patient confirmed that there were no contraindications to taking radiographs, including but not limited to pregnancy, trying to become pregnant, receiving active radiation therapy, or other contraindication for Xray exposure. The rationale was due to need of structural integrity assessment.

- Views: The radiographs were performed in office in the standing (weight bearing) position with the following view(s): Full Spine-AP/L.

- | | |
|----------------------------------|--|
| - Demineralization: | none detected for areas visualized. |
| - Degenerative Joint Disease: | none detected for areas visualized. |
| - Degenerative Disc Disease: | none detected for areas visualized. |
| - Foraminal Encroachment: | none detected for areas visualized left and right (equal). |
| - Observation of the following: | no pathology observed for areas visualized. |
| - Curve Analysis-cervical spine: | curve severe decrease and with anterior weight bearing. |

Assessment:

ASSESSMENT:

[REDACTED] is of good health and is expected to make good progress and recovery with few residuals. She has no complicating factors and no noted contraindications to chiropractic care. Based on her history and examination, it is reasonable to believe that her recovery may take about the same length of time as an average patient with an uncomplicated case.

DIAGNOSIS:

Upon consideration of the information available I have diagnosed [REDACTED] [REDACTED] with: (M99.01) Segmental and somatic dysfunction of cervical region, (M54.2) Cervicalgia, (M99.04) Segmental and somatic dysfunction of sacral region, (M99.02) Segmental and somatic dysfunction of thoracic region

Chart Notes

Chiropractic

Acct #: 8791

Pol #:

D.C.

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Diagnosis M99.01: Segmental and somatic dysfunction of cervical region
M54.2: Cervicalgia
M99.04: Segmental and somatic dysfunction of sacral region
M99.02: Segmental and somatic dysfunction of thoracic region

██████████ Chiropractic
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██████████
██████████
██████████ 3 ██████████ ██████████

Patient Balance:

[REDACTED]

[REDACTED]
[REDACTED] [REDACTED]
[REDACTED] [REDACTED] [REDACTED]
[REDACTED] [REDACTED] [REDACTED]

Patient Balance: (\$5.60)

██████████ Chiropractic
██████████, D. ██████████ ██████████ ██████████
██████████n, ██████████ ██████████ ██████████

Thank you for your business!