



15401 S Main St.
Gardena, CA 90248 - 2214
PH: 424 292-3260
FAX: 424 292-3266

PHYSICAL THERAPY VISIT NOTE

Patient First Name:	Patient Last Name:	Date of Birth:	Sex:
Kim	Golden	09-18-1966	Female
Attending Provider:	Referring Provider:	Visit Date:	Chart No.:
Laura Miller, PT		09-19-2023	SCL54270
Insurance:	Employer:	Claim Number:	Date of Injury:
Sedgwick	Centinela Valley Unified School District	4A2308PWV6Z-0001	07-27-2023
Appointment Location:		Appointment Location Address:	
Agile Occupational Medicine, Gardena		15401 S Main St., Gardena CA 90248 - 2214	

History of Present Illness

Patient is a 57 year old female.

Surgical History

C-Section: 1990. Cholecystectomy: Feb 2023. Right inguinal hernia repair: 2014.

Allergy

No Known Drug Allergies.

Current Medication

Diclofenac gel
Flexeril
Ibuprofen 800mg
Plaquinil

Social History

Work History: She is employed - full time. Custodian . She has been in the current profession for Custodian - 7 years.

Use of Drugs/Alcohol/Tobacco: Never drinks any alcohol. Reports drinking other. Smoking Status (MU) never smoker. She denies her alcohol consumption as being problem to self or family or others. Reports consuming caffeine/cafeinated drinks 1-2 cup a day. She has never used any illicit drugs. She denies using street drugs with a needle.

Vitals

Pain Scale: On a scale of 1-10 (with 10 being the worst), the patient reports current pain is 6 out of 10. In the past week, the lowest/best pain was 6 out of 10 and the highest/worst pain was 8 out of 10.

Physical Examination

Today's Physical Therapy Treatment:

**PT Daily Note*

Treatment Times:

Treatment Start Time: 9:45 am.

Treatment End Time: 10:40 pm.

Treatment Summary:

This is visit number 3.

Authorized number of visits: 6.

Next Doctor's Appointment: 09-19-2023.

Subjective: Patient states she feels better, pain down to steady 6/10 pain. Her leg feels stronger.

Objective: TTP with trigger points left piriformis, left SI. Leg length = today. Progressed strength exercises.

Informed consent was obtained from the patient, risks were reviewed, past medical history was reviewed, and no contraindications were identified.

Precautions:

Precautions: There are no precautions to treatment.

Procedures and Constant Attendance Modalities:

Therapeutic/Functional Activities (97530): 1 unit. 10 minutes

Therapeutic Exercise (97110): 2 units. 23 minutes

Manual Therapy (97140): 1 unit. 10 minutes

Modalities Performed:

E-Stim (G0283): 1 Unit 10 min IFC left hip in right sidelying with MH The patient's skin was checked and found clear following treatment.

Supplies Dispensed:

Red/Medium Resistance Theraband was dispensed for use during home exercise program.

Patient Education:

Patient was instructed in with return demonstration and understanding: Reviewed self massage techniques using massage roller

Manual Therapy:

Myofascial Release: left lumbar, gluts, QL and piriformis, TP release left IT band

JT Mobilization: left iliac post rotation grade 2/3 left leg pulls gentle traction

Exercises:

Other Exercises: Self inferior mob L hip 2 x10

Left SKTC 1 x10

Wig wags 1 x10

L/R piriformis stretch 1 x10 10 sec

L/R hip flex stretch 1 x10 10 sec

Hook lying iso hip add/ball squeeze 1 x10 10 sec

Pelvic rocking 1 x10

PPT static hold 1 x10 10 sec
L/R clams 1 x10
Table top hip ext 1 x10 alt
Slant board calf stretch 3 x 20 sec
Pallof press 2 x 10 orange tband
Hip Abduction standing 2 x 10 tband at ankles yellow loop

Assessment and Plan

ICD: Strain of left hip, initial encounter (S76.012A)

Assessment: PT 3/6

Patient response to treatment: demonstrated good form with exercise needing occasional cuing for proper technique. Able to progress core/hip strength exercises. Good response to manual interventions and positive effect of modalities for pain management.

Patient requires verbal/tactile cues to facilitate proper execution of exercise, correct posture and prevent compensatory movements.

Home exercise program was reviewed as outlined to address strength, ROM and postural deficits.

Patient will benefit from continued skilled physical therapy to address impairments and facilitate improvements in function to return to independent ADL's and full work duty.

Plan: Continue PT per POC as indicated/tolerated to address and alleviate signs and symptoms, impairments and functional RTW deficits.

Next visit, emphasis on: core stabilization, hip strengthening as symptoms allow.

ICD: Strain of left hip, subsequent encounter (S76.012D)

Assessment: Patient evaluated today for left hip strain with underlying chronic non-industrial medical condition. Patient likely aggravated her underlying chronic hip pain. Mild tenderness to palpation.

Plan: Awaiting approval of PT x 6 to help with the aggravation of the left hip pain

Ice or heat pack twice a day as need for pain

Voltaren gel 1% as needed for pain

CPT/HCPC Codes

Code	Name	Modifier	Units	Comments
97530	Therapeutic Activities		1	
97140	Manual Therapy 1/> Regions		1	
G0283	Electrical stimulation (unattended), to one or more areas for indication(s) other than wound care, as part of a therapy plan of care		1	
97110	Therapeutic px 1/> areas each 15 min exercises		2	
99070	Supplies&materials above/beyond prov by phys/qhp		1	

Work Status

Per Primary Treating Physician (PTP)

Golden, Kim DOB:09-18-1966

Next Appointment: 09-22-2023 10:00 am, at Agile Occupational Medicine, Gardena with Scott Russell PT

A handwritten signature in black ink that reads "Laura Miller PT". The signature is cursive and fluid.

Laura Miller PT

This has been electronically signed by Laura Miller PT for visit dated 09-19-2023.

Clinic Address: 15401 S Main St., Gardena CA 90248 - 2214

A handwritten signature in black ink that reads "Laura Miller PT". The signature is cursive and fluid.

Laura Miller PT
Rendering Provider

This has been electronically signed by Laura Miller PT for visit dated 09-19-2023.