**ANSIE VAN ZYL**

**OCCUPATIONAL THERAPIST**

(B.Occupational Therapy UFS)

(Dip Voc Rehab UP)

PRNO: 6619118

HPCSA 0014370

28 7th Avenue (w) 041 3650276

Newton Park [ansie@vansyl.co.za](mailto:ansie@vansyl.co.za)

PORT ELIZABETH

6045

PO Box 6017

Walmer

6065

**Occupational Therapy Medico Legal Report**

|  |  |
| --- | --- |
| Name:  Date of birth:  ID:  Age:  Address:  Date of injury:  Date of assessment:  Date of report:  Prepared for:  Prepared by:  **Ref:** | {fullName}  {dateOfBirth}  {IdNumber}  {age} years  {line1}  {line2}  {city}  {postalCode}  {dateOfInjury}  {assessmentDate}  {today}  {attorney}  {lawFirm}  {lawFirmCity}  Ansie van Zyl Occupational Therapist 28 7th Avenue, Newton Park Port Elizabeth  **{ref}** |

Contents

1. **Purpose of Report**
2. **Sources of Information**
   1. Interview
   2. Documentation received
3. **History**
   1. Personal history
   2. Medical history
   3. Work History
4. **Components Assessment**
   1. Current complaints (reported by the claimant)
   2. Clinical observations
   3. Physical assessment
   4. Cognitive assessment
   5. Affect
   6. Motivation
   7. Functional
   8. Work assessment
5. **Summary**

5.1 Discussion

5.2 Recommendations

1. **Purpose of report**

The report is aimed at providing details on the impact of the claimant's injuries on his/her pre-accident roles and circumstances, with specific reference to:

−Activities of daily living  
−Leisure and recreational activities  
−Work

The need for assistance at home, adaptive equipment and the loss of life amenities suffered from, as a result of injuries sustained, will also be reported on.

**2. Sources of Information**

**2.1 Interview and assessment:**

The writer consulted with {fullName} on {assessmentDate} at 28 7th Avenue, Newton Park, for interview and assessment.

**2.2 Documentation Received**

|  |  |  |
| --- | --- | --- |
| **Date Description Author** | | |
|  |  |  |
| {#documents}{date\_authored} | {file\_name} | {author\_name}{/documents} |
|  |  |  |

**3. History**

**3.1 Personal History**

**3.1.1 Early Childhood:**

{earlyChildhood}

**3.1.2 Family:**

{family}

**3.1.3 Home environment:**

{homeEnvironment}

**3.1.4 Educational:**

{educational}

**3.1.5 Work:**

3.1.5.1 Premorbid:

{premorbid}

3.1.5.2 Postmorbid:

{postmorbid}

**3.1.6 Social habits:**

{socialHabits}

**3.2 Medical history**

**3.2.1 Past medical history**

3.2.1.1 Previous injuries:

{previousInjuries}

3.2.1.2 Medical conditions:

{medicalConditions}

**3.2.2 Current history**

{currentHistory}

3.2.2.1 Medication:

{medication}

**3.3 Work History**

{workHistory}

**4. Components of Assessment**

**4.1 Current complaints** (reported by the claimant)

{currentComplaints}

**4.2 Clinical observations**

{clinicalObservations}

4.3 Physical assessment

4.3.1 General appearance

{generalAppearance}

4.3.2 Muscle power

Grip strength was measured as {rightHand}lb in the right hand and {leftHand}lb in the left hand. The norm for his/her age and gender is {dominantHand} in the dominant hand and {nondominantHand} in the non dominant hand.

4.3.3 Range of motion

{#hasShoulder}

**Shoulder**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Movements of Shoulder** | **Normal** | **Range Of Motion** | | **Muscle Power** | |
|  |  | **Right** | **Left** | **Right** | **Left** |
| Flexion | 0 - 180° front | {shRFlex}° | {shLFlex}° | {shRMFlex} | {shLMFlex} |
| Extension | 0 - 150° | {shRExtn}° | {shLExtn}° | {shRMExtn} | {shLMExtn} |
| Abduction | 0 - 80° in | {shRAbd}° | {shLAbd}° | {shRMAbd} | {shLMAbd} |
| Adduction | 0 - 80° out | {shRAdd}° | {shLAdd}° | {shRMAdd} | {shLMAdd} |
| Internal Rotation | 0 - 45° | {shIrRig}° | {shIrLft}° | {shIrRigM} | {shIrLftM} |
| External Rotation | 0 - 45° | {shErRig}° | {shErLft}° | {shErRigM} | {shErLftM} |

{/hasShoulder}

{#hasForearmAndWrist}

**Forearm and wrist**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Forearm and wrist** | **Normal** | **Range Of Motion** | | **Muscle Power** | |
|  |  | **Right** | **Left** | **Right** | **Left** |
| Pronation | 0 - 80° down | {fwRPro}° | {fwLPro}° | {fwRMPro} | {fwLMPro} |
| Supination | 0 - 80° up | {fwRSup}° | {fwLSup}° | {fwRMSup} | {fwLMSup} |
| Extension | 0 - 70° | {fwRExtn}° | {fwLExtn} | {fwRMExtn} | {fwLMExtn} |
| Flexion | 0 - 80° | {fwRFlex}° | {fwLFlex}° | {fwRMFlex} | {fwLMFlex} |
| Radial deviation | 0 - 20° | {fwRRad}° | {fwLRad}° | {fwRMRad} | {fwLMRad} |
| Ulnar deviation | 0 - 30° | {fwRUlnar}° | {fwLUlnar}° | {fwRMUlnar} | {fwLMUlnar} |

{/hasForearmAndWrist}

{#hasElbow}

Elbow

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Movements of Elbow** | **Normal** | **Range Of Motion** | | **Muscle Power** | |
|  |  | **Right** | **Left** | **Right** | **Left** |
| Extension | 150 - 0° | {elRExtn}° | {elLExtn}° | {elRMExtn} | {elLMExtn} |
| Flexion | 0 - 150° | {elRFlex}° | {elLFlex}° | {elRMFlex} | {elLMFlex} |
| Pronation | 0 - 80° in | {elRPro}° | {elLPro}° | {elRMPro} | {elLMPro} |
| Supination | 0 - 80° out | {elRSup}° | {elLSup}° | {elRMSup} | {elLMSup} |
| Extension | 150 - 0° | {elRExtn}° | {elLExtn}° | {elRMExtn} | {elLMExtn} |
| Flexion | 0 - 150° | {elRFlex}° | {elLFlex}° | {elRMFlex} | {elLMFlex} |
| Pronation | 0 - 80° in | {elRPro}° | {elLPro}° | {elRMPro} | {elLMPro} |
| Supination | 0 - 80° out | {elRSup}° | {elLSup}° | {elRMSup} | {elLMSup} |

{/hasElbow}

{#hasHand}

**Hand**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Movements of Hand** | **Normal** | **Range Of Motion** | | **Muscle Power** | |
|  |  | **Right** | **Left** | **Right** | **Left** |
| MP | 20 - 0 - 90° | {haRMP}° | {haLMP}° | {haRMMP} | {haLMMP} |
| PIP | 0 - 100° | {haRPIP}° | {haLPIP}° | {haRMPIP} | {haLMPIP} |
| DIP | 0 - 90° | {haRDIP}° | {haLDIP}° | {haRMDIP} | {haLMDIP} |

{/hasHand}

{#hasHip}

**Hip**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Movements of Hip** | **Normal** | **Range Of Motion** | | **Muscle Power** | |
|  |  | **Right** | **Left** | **Right** | **Left** |
| Flexion | 0 - 120° front | {hipRFlex}° | {hipLFlex}° | {hipRMFlex} | {hipLMFlex} |
| Extension | 0 - 30° | {hipRExtn}° | {hipLExtn}° | {hipRMExtn} | {hipLMExtn} |
| Abduction | 0 - 45° up | {hipRAbd}° | {hipLAbd}° | {hipRMAbd} | {hipLMAbd} |
| Adduction | 0 - 30° | {hipRAdd}° | {hipLAdd}° | {hipRMAdd} | {hipLMAdd} |
| Internal Rotation | 0 - 45° | {hipIrRig}° | {hipIrLft}° | {hipIrRigM} | {hipIrLftM}° |
| External Rotation | 0 - 45° | {hipErRig}° | {hipErLft}° | {hipErRigM} | {hipErLftM} |

{/hasHip}

{#hasKnee}

Knee

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Movements of Knee** | **Normal** | **Range Of Motion** | | **Muscle Power** | |
|  |  | **Right** | **Left** | **Right** | **Left** |
| Flexion | 0 - 130° | {knRFlex}° | {knLFlex}° | {knRMFlex} | {knLMFlex} |
| Extension | 0 - 10° | {knRExtn}° | {knLExtn}° | {knRMExtn} | {knLMExtn} |

{/hasKnee}

{#hasAnkle}

**Ankle**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Movements of Ankle** | **Normal** | **Range Of Motion** | | **Muscle Power** | |
|  |  | **Right** | **Left** | **Right** | **Left** |
| Dorsiflexion | 0 - 20° | {anRDflex}° | {anLDflex}° | {anRMDflex} | {anLMDflex} |
| Plantar flexion | 0 - 60° | {anRPflex}° | {anLPflex}° | {anRMPflex} | {anLMPflex} |
| Inversion | 0 - 10° in | {anRInvers}° | {anLInvers}° | {anRMInvers} | {anLMInvers} |
| Eversion | 0 - 10° out | {anREvers}° | {anLEvers}° | {anRMEvers} | {anLMEvers} |

{/hasAnkle}

4.3.4 Pain

4.3.5 Balance

Berg Balance Scale

{borgBalance}

**4.3.6 Sensation**

{sensation}

**4.3.7 Co-ordination**

{coordination}

**4.3.8 Posture**

{posture}

**4.3.9 Mobility**

{mobilityComment}

**4.3.10 Gait**

{gait}

**Repetitive Tolerance Protocol Assessment**

**Walking**

{walking}

**Stair Climbing**

{stairClimbing}

**Balance**

{balance}

**Ladder Work**

{ladderWork}

**Repetitive Squatting**

{repetitiveSquatting}

**Repetitive Foot Motion**

{repetitiveFootMotion}

**Crawling**

{crawling}

**4.4 Cognitive assessment**

**4.4.1 Attention and Concentration**

{attentionAndConcentrationComment}

**4.4.2 Memory**

4.4.2.1 Short term:

{genderPronoun} was able to retain {memoryScore}/{memoryTotalScore} unrelated words as per {memoryAssessmentType}

4.4.2.2 Long term:

{memoryComment}

**4.4.3 Insight**

{insightComment}

4.4.4 Reading

{readingComment}

4.4.5 Speech

{speechComment}

4.4.6 Writing

{writingComment}

**4.4.7 Visual perception**

{visualPerceptionComment}

**4.5 Affect**

{affectComment}

**4.6 Motivation**

**4.7 Functional**

**4.7.1 Personal care:**

**4.7.2 Sleeping**

**4.7.3 Home management:**

**4.7.4 Leisure:**

**4.7.5 Driving:**

**4.8 Work Assessment**

**4.8.1 Job Description**

{jobDescription}

4.8.1.2 Work assessment

**Physical Capacity:**

Positional tolerance tasks:

{#positionalToleranceTasks}

|  |  |  |
| --- | --- | --- |
| **Activity Performance Job Demand** | | |
|  |  |  |
| {#ptTasks}{activity} | {performance} | {jobDemand}{/ptTasks} |
|  |  |  |

{/positionalToleranceTasks}

{#noPositionalToleranceTasks}

Not Applicatble

{/noPositionalToleranceTasks}

Forceful tasks:

{#forcefulTasks}

|  |  |  |
| --- | --- | --- |
| **Activity Performance Job Demand** | | |
|  |  |  |
| {#fTasks}{activity} | {performance} | {jobDemand}{/fTasks} |
|  |  |  |

{/forcefulTasks}

{#noForcefulTasks}

Not Applicatble

{/noForcefulTasks}

Repetitive tolerance tasks:

{#repetitiveTasks}

|  |  |  |
| --- | --- | --- |
| **Activity Performance Job Demand** | | |
|  |  |  |
| {#rtTasks}{activity} | {performance} | {jobDemand}{/rtTasks} |
|  |  |  |

{/repetitiveTasks}

{#noRepetitiveTasks}

Not Applicatble

{/noRepetitiveTasks}

Blankenship, 1990 used the physical demands to classify work into different categories:

**Sedentary work:** Occasional lifting of 4kg maximum and occasional lifting or carrying articles such as dockets, ledgers and small tools. Although a sedentary job is defined as one that involves sitting, a certain amount of walking and standing is often necessary in carrying out the job duties. Jobs are sedentary if walking and standing are required only occasionally and all other sedentary criteria are met.

**Light work:** Occasionally lifting 9kg maximum and/or frequently lifting or carrying objects weighing up to 5kg. Even though the weight lifted may be only a negligible amount, a job will be in this category (1) when it requires walking or standing to a significant degree or (2) when it requires sitting most of the time but entails pushing and pulling of arm or leg controls.

**Medium work:** Occasionally lifting 23kg maximum and/or frequently lifting or carrying objects weighting up to 9kg.

**Heavy work:** Occasionally lifting 45kg maximum and/or frequently lifting or carrying objects weighing up to 23kg.

**Very heavy work:** Occasionally lifting objects in excess of 45.36kg and/or frequently lifting or carrying objects weighing 23kg or more.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Sedentary | Light | Light-Medium | Medium | Medium-Heavy | Heavy | Very-  Heavy |
| Occasional: 25m -  2 ½ hrs per day | 5kg | 9kg | 16kg | 23kg | 34kg | 45kg | 45kg+ |
| Frequent: 2 ½ -  5 ½ hrs per day | Negligible | 5kg | 7kg | 9kg | 16kg | 23kg | 23kg+ |
| Constant: 5 ½ - 8hrs per day | Negligible | Negligible | 3kg | 5kg | 7kg | 9kg | 9kg+ |

Frequent: 34 – 66% of the day.

Constant: 67 – 100% of the day.

**5. Summary**

* 1. **Discussion**

{discussion}

5.1.1. Loss of amenities

{lossOfEmenities}

5.1.2 Residual work capacity

{residualWorkCapacity}

**5.2 Recommendations**

{recommendations}

**5.2.1 Future Medical Expenses**

{futureMedicalExpenses}

**5.2.2 Future Medication and Surgical Intervention**

{futureMedicalAndSurgicalIntervention}

**5.2.3 Supplementary Health Services**

{supplementaryHealthServices}

**5.2.4 Physiotherapy**

{physiotherapy}

* + 1. **Psychology**

{psychology}

* + 1. **Occupational Therapy**

{occupationalTherapy}

**5.2.7 Special and Adapted Equipment**

{specialEquipment}

**5.2.8 Assistance Required**

5.2.8.1 Case Management

{caseManagement1}

5.2.8.2 {caseManagement2}

**5.2.9 Transportation Costs**

{transportationCosts}

The writer reserves the right to alter her opinion if any new information comes to hand.

Please contact me for further information if necessary.

Thank you for the referral.



Ansie van Zyl

Occupational Therapist