

Hudson Valley Chiropractic Health Services P.C.  
108 Kenilworth Pl.  
Brooklyn, NY 11210

Last Name: Alexis First Name: Christopher D.O.A. 5-7-23

Date: 5-8-23

Subjective: ☐ Headaches ☒ Neck Pain ☒ Upper/Mid Back ☒ Low Back Pain

Other: (L) Shoulder R Hip

Objective: Cervical/Thoracic/Lumber/Sacral/Pelvic Myo Spasm Tenderness Trigger Point Sublux.

Assessment: Same Slightly Better Much Better Worse New Condition

Plan/Treatment CMT: 98941( ) 3-4 Regions 99203( ) Initial visit 97112( ) Stretching 97110( ) Electric Stim 97014  
( ) Trigger Pt Therapy Traction Activator Myofascial Release F/D

Comments: \_\_\_\_\_

Cavitation: Yes No Partial (With) Pain Yes No

Patient's Signature: X E Alexis DC. Signature: [Signature]

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