

Physiotherapy And Occupational Therapy Form										
Patient Name	:	Alston Re	ebello			Emirates ID		784-1991-2906159-3		
File No	:	17	DOB		1996-06-20	Nationality		Indian		
Gender	:	Male	Doctor's Name	:	Shilpa Sandhya	Date	:	2024-02-12		

Referring Physician:																			
Specialty:				ENT															
Date:				2/12/2024 12:00:00 AM															
Diagnosis:				NA															
Onset/Duration:				1/1/1900 12:00:00 AM															
Associated Problems:																			
Current F	unctional S	tatus:																	
Mental St	atus:		Orio	ented	C Disoriente				oriented	I	C Impaired Cognition					COthers			
Pain Asse	essment Site	e of Pa	in																
Score				C1		<b>C</b> 2		<b>©</b> 3	<b>C</b> 4	0	5	<b>C</b> 6	<b>O</b> 7	<b>C</b> 8		<b>C</b> 9	C10		
Pain Medication																			
Pain Management Plan:																			
STRENGTH 0-5/5			R.O.M				PART ACTION		TON	STRENGTH 0-5/5			R.O.M						
		R	L		I	R		L					R	L		R	L		
Shoulder	Abduction									HIP	Abd	luction							
	Abduction										Abd	luction							
	Flexion										Flex	kion							
	Extension										Exte	ension							
	Int. Rotation										Int. Rot	ation							
	Ext. Rotation										Ext. Rot	ation							

Elbow	Flexion				Knee	Flexion				
	Extension					Extension				
Forearm	Supination				Wrist	Flexion				
	Pronation					Extension				
Fingers	Grip				Trunk Balance	Flexion				
	Extension					Extension				
Ankle	Dorsiflexion				Neck Movement	Flexion				
	Plantar Flexion					Extension				
	Eversion					Lat Flexion				
	Inversion					Rotation				
Foot/Toe	pot/Toes									
Fine Moto	ors									
Hand Doı	Hand Dominance									
Spasticity	' Score									
Spasticity	/ Medications&Doses									
Orthotic/	Equipment									
1.										
2.										
3.										
4.										
Goals										
Short Ter	m		Time Fram	e & Freque	ncy/wk:					
Long Ter	m				Time Fram	e & Freque	ncy/wk:			

Sign here, only if all of your questions ha	Sign here, only if all of your questions have been answered to your satisfaction					
PATIENT	DOCTOR					

Patient Name	Doctor Name
Alston Rebello	Shilpa Sandhya - Occupational Therapy (FDY56YGDFG)
Date	Date
2024-02-12 18:00	2024-02-12 18:00

