

Physiotherapy And Occupational Therapy Form										
Patient Name	:	hima bindhu	ı			Emirates ID		784-3229-9977333-3		
File No	:	10	DOB		2000-09-29	Nationality	:	Other		
Gender	:	Female	Doctor's Name		Shilpa Sandhya	Date	:	2024-02-12		

Referring Physician:																		
Specialty:				ENT														
Date:					2/12/2024 12:00:00 AM													
Diagnosis	5:				NA													
Onset/Duration:				1/1/1900 12:00:00 AM														
Associate	ed Problems	:																
Current F	unctional S	tatus:																
Mental Si	tatus:		Orie	ented	C Disoriente				d		© Impaired Cognition			0	COthers			
Pain Asse	essment Sit	e of Pa	in				•				•			•				
Score					O1	0	2	<b>C</b> 3	<b>C</b> 4		<b>C</b> 5	<b>C</b> 6	<b>C</b> 7	<b>C</b> 8		<b>C</b> 9	C 10	
Pain Med	ication					J.		•	•			•				•	•	
Pain Man	agement Pl	an:																
STRENGTH  PART ACTION 0-5/5					R.O.M	R.O.M		P	ACTION	STRENGTH 0-5/5			R.O.M					
		R		L	R		L					R	L		R	I	L	
Shoulder	Abduction								HIP	P	Abduction							
	Abduction									A	Abduction							
	Flexion									F	Flexion							
	Extension									E	Extension							
Int. Rotation Ext. Rotation											nt. Rotation							
									E	Ext. Rotation								

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/Toes												
Fine Moto	ine Motors											
Hand Doı	minance											
Spasticity	' Score											
Spasticity	/ Medications&Doses											
Orthotic/	Equipment											
1.												
2.												
3.												
4.												
Goals												
Short Term						Time Frame & Frequency/wk:						
Long Ter	m				Time Frame & Frequency/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
hima bindhu	Shilpa Sandhya - Occupational Therapy (FDY56YGDFG)
Date	Date
2024-02-12 23:15	2024-02-12 23:15

