

Physical Therapy Discharge (71846495)
ADAMS, BETTY (467645802A)
Visit Date: 12/13/2012

PROLINK HH
8500 STEMMONS FRWY
DALLAS TX, 75247 2142671985
Time In: 19:49
Time Out: 20:29

Diagnosis/History

Status at:	Eval	D/C	Part	Action	ROM	Strength
Bed Mobility	% Assist	% Assist			Right Left	Right Left
Rolling	SBA %	MI %	Shoulder	Flexion	25%lim WFL	4+/5 4+/5
Sup to Sit	CGA	MI %		Extension	25%lim WFL	4+/5 4+/5
Sit Stand Sit	Min	MI %		Abduction	25%lim WFL	4+/5 4+/5
Transfers				Int Rot	25%lim WFL	4+/5 4+/5
Bed to Chair	CGA	MI %		Ext Rot	25%lim WFL	4+/5 4+/5
Chair to W/C		%	Elbow	Flexion	25%lim WFL	4+/5 4+/5
Toilet or BSC		%		Extension	25%lim WFL	4+/5 4+/5
Sitting			Finger	Flexion	25%lim WFL	4+/5 4+/5
Static	F	G %		Extension	25%lim WFL	4+/5 4+/5
Dynamic	F-	G %	Wrist	Flexion	25%lim WFL	4+/5 4+/5
Standing				Extension	25%lim WFL	4+/5 4+/5
Static	F	G %	Hip	Flexion	25%lim WFL	4+/5 4+/5
Dynamic	F-	F+ %		Extension	25%lim WFL	4+/5 4+/5
Gait				Abduction	25%lim WFL	4+/5 4+/5
Level	CGA %	S		Int Rot	25%lim WFL	4+/5 4+/5
Unlevel	%	%		Ext Rot	25%lim WFL	4+/5 4+/5
Assistive Device	%	%	Knee	Flexion	25%lim WFL	4+/5 4+/5
W/C Mobility				Extension	25%lim WFL	4+/5 4+/5
Level	%	%	Ankle	Plant Flexion	25%lim WFL	4+/5 4+/5
Ramp	%	%		Flexion	25%lim WFL	4+/5 4+/5
Maneuver	%	%	Trunk	Extension	WFL	4+/5 4+/5
Pain Level	3	1		Rotation	WFL	4+/5 4+/5
ADL	%	%		Flexion	WFL	4+/5 4+/5
Endurance:	Poor+	F+	Neck	Flexion	WFL	4+/5 4+/5
				Extension	WFL	4+/5 4+/5
				Lat Flexion	WFL	4+/5 4+/5
				Long Flexion	WFL	4+/5 4+/5
				Rotation	WFL	4+/5 4+/5

Treatment Plan

- ☐ Thera Ex
 ☐ Bed Mobility Training
 ☐ Transfer Training
 ☐ Balance Training
☐ Gait Training
 ☐ HEP
 ☐ Electrotherapy
 ☐ Ultrasound
☐ Prosthetic Training
 Other:

Reason for Discharge

- ☒ Reached Maximum Potential
 ☐ No Longer Homebound
 ☐ Per Patient/Family Request
 ☐ Prolonged On-Hold Status
☐ Prolonged On-Hold Status
 ☐ Hospitalized
 ☐ Expired
 Other

Frequency: BP 121/76 HR 70

Duration: n/a

PT Signature: (Michael Bram Lewis)

Date: 12/13/2012

Digitally signed by: Michael Bram Lewis, DPT

Physician Signature:

Date:

Physician: Dr. Ketha, Sumana

Clinician: Chidi, Josephine

Signature: 

Signature: 

Date: 1/22/2013

Date: 12/13/2012