

Physical Therapy Treatment Plan

Patient Name: Mike Thompson

Date of Birth: 08/22/1990

Start of Care: 02/12/2025

Payer: United Healthcare

Hospitalization: None

Diagnosis

The patient has the following diagnoses: Med – sprain of cervical spine ligaments (S13.4) with an onset date of 01/20/2025, Tx – cervicgia (neck pain) (M54.2) with an onset date of 01/20/2025, Tx – muscle spasm of the neck (M62.830) with an onset date of 01/20/2025, Tx – other abnormal involuntary movements (R29.898) with an onset date of 01/20/2025, and Tx – other abnormalities of gait and mobility (R26.89) with an onset date of 01/20/2025.

Treatment Approaches

- PT Evaluation
 - Therapeutic Exercises
 - Neuromuscular Reeducation
 - Manual Therapy (Soft tissue mobilization, Joint mobilization)
 - Therapeutic Activities
 - Electric Stimulation (as needed for pain relief)
 - Diathermy Treatment and/or Microwave Therapy
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Frequency, Duration, Intensity, Certified Period

- **Frequency:** 2-3 sessions per week
 - **Duration:** 6 weeks
 - **Intensity:** Moderate intensity with gradual progression
 - **Certified Period:** 02/12/2025 - 03/26/2025
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Plan of Treatment

Short Term Goals

1. Mike will demonstrate improved cervical range of motion with at least a 30% increase in left and right rotation without pain. (Target: 02/26/2025)
2. Mike will decrease pain levels from 7/10 to 4/10 on the Visual Analog Scale with neck movements. (Target: 02/26/2025)
3. Mike will safely perform head-turning movements while driving with Min (A) and 10% verbal cues for proper movement patterns. (Target: 02/26/2025)
4. Mike will perform cervical stabilization exercises with Min (A) and proper muscle activation to reduce tension and improve posture. (Target: 02/26/2025)

Long Term Goals

1. Mike will achieve full cervical ROM with normalized movement patterns and no pain during daily activities. (Target: 03/26/2025)
2. Mike will report a decrease in pain levels to 0-2/10 on the Visual Analog Scale during functional tasks. (Target: 03/26/2025)
3. Mike will demonstrate improved postural control with endurance for 30 minutes of static sitting without pain or discomfort. (Target: 03/26/2025)
4. Mike will independently perform home exercise program with proper form and no symptoms exacerbation. (Target: 03/26/2025)

Patient Goals

- “To be able to turn my head comfortably while driving and get back to my normal daily activities without pain.”

Potential for Achieving Goals

- Mike demonstrates good rehab potential as evidenced by a high prior level of function, motivation to participate, insight regarding functional deficits, and ability to follow multi-step directions.

Participation

- Mike is highly motivated to regain functional independence, return to driving comfortably, and perform daily activities without pain.
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Initial Assessment / Current Level of Function & Underlying Impairments

Factors Supporting Medical Necessity

- **Referral:** Referred by Primary Care Physician following a motor vehicle accident resulting in whiplash injury.
 - **Medical History:** Whiplash injury with cervical sprain and muscle spasm.
 - **Complexities:** Neck pain and stiffness, decreased cervical ROM, difficulty turning head, and muscle spasms.
 - **Prior Treatment:** NSAIDs and rest with minimal improvement.
 - **Prior Living Situation:** Independent with all activities of daily living.
 - **Discharge Plan:** Return to prior level of function without pain or mobility limitations.
 - **Prior Level of Function (PLOF):** Fully independent and active lifestyle.
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Background Assessment

- **Precautions:** Avoid rapid head movements and excessive cervical extension.
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Joint ROM / Goniometric Measurements

- **Cervical ROM:**
 - Flexion: 0-40° (Mild limitation)
 - Extension: 0-30° (Moderate limitation)
 - Left Rotation: 0-45° (Significant limitation)
 - Right Rotation: 0-40° (Moderate limitation)
 - Left Lateral Flexion: 0-20° (Limited with pain)
 - Right Lateral Flexion: 0-25° (Mild limitation)
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Strength / Manual Muscle Testing

- **Cervical Strength:**
 - Flexors: 4-/5 (Mild weakness)
 - Extensors: 4-/5 (Moderate weakness)
 - Lateral Flexors (Left and Right): 4-/5 (Mild weakness)
 - Rotators (Left and Right): 3+/5 (Limited by pain)
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Balance

- **Sitting Balance:** Good with mild postural sway.
 - **Standing Balance:** Good without assistive devices.
 - **Balance Loss:** None reported.
 - **Reactions & Strategies:** Normal protective reactions.
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Additional Abilities / Underlying Impairments

- **Cardiopulmonary Function:** Within normal limits.
 - **Tone and Posture:** Increased muscle tension in upper trapezius and cervical paraspinals.
 - **Pain and Edema:** Pain reported as 7/10 in the neck, radiating to the shoulders.
 - **Coordination:** Mild deficits noted in head-turning movements.
 - **Sensory Test Findings:** No sensory deficits.
 - **Cognition:** Intact.
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Visual Assessment

- **History and Analysis:** No visual impairments affecting neck movements.
 - **Testing:** WNL (Within Normal Limits).
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Functional Assessment

- **Bed Mobility:** Independent with mild discomfort during head movements.
 - **Transfers:** Independent.
 - **Gait:** Normal gait pattern without assistive devices.
 - **Gait Analysis:** No abnormalities noted.
 - **Other Areas:** Difficulty with head turning during driving and daily tasks.
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Objective Tests / Measures & Additional Analysis

- **Assessments:**
 - **Neck Disability Index (NDI):** 40% (Moderate Disability)
 - **Visual Analog Scale (Pain):** 7/10 during head rotation
- **Other:** Home Exercise Program needed for cervical stabilization and mobility.
- **Additional Analysis:**
 - **Postural Analysis:** Forward head posture with rounded shoulders.

Clinical Impressions

Mike presents with cervical sprain and muscle spasm due to whiplash injury, resulting in pain, limited ROM, and functional deficits. Symptoms are exacerbated by head movements, especially during driving. He demonstrates good rehab potential with skilled PT interventions, including cervical stabilization exercises, manual therapy for muscle tension relief, neuromuscular reeducation for postural control, and pain management techniques. Progressive strengthening and mobility exercises will be emphasized to restore function and reduce pain.

Test/Measures and Outcomes

- **Neck Disability Index (NDI):** Target to reduce to < 10% by the end of treatment.
- **Visual Analog Scale (Pain):** Target to decrease from 7/10 to 0-2/10.