Physical Therapy Treatment Plan

Patient Name: Sarah Johnson Date of Birth: 08/23/1985 Start of Care: 02/12/2025 Payer: Private Insurance Hospitalization: None

Diagnosis

The patient has the following diagnoses: Med – Acute Lumbar Strain (M54.5) and Tx – Muscle Spasm of the Back (M62.830), both with an onset date of 02/08/2025.

Treatment Approaches

- **PT Evaluation** (Initial evaluation of lumbar spine range of motion (ROM), strength, and functional limitations to assess the severity of the lumbar strain and muscle spasm.)
- **Manual Therapy** (Soft tissue mobilization for the lower back muscles, joint mobilizations for the lumbar spine to improve mobility and reduce spasm.)
- Therapeutic Exercises (Core strengthening exercises, lumbar stabilization exercises, and gentle stretching for back muscles to improve flexibility and posture.)
- **Neuromuscular Reeducation** (Proprioception and postural correction exercises to improve lifting mechanics and prevent further strain.)
- Modalities (Ice or heat therapy for pain relief, TENS for muscle spasm reduction.)
- **Postural Training** (Education on proper body mechanics, especially for lifting and sitting, to prevent future injuries.)

Frequency, Duration, Intensity, Certified Period

• Frequency: 2-3 sessions per week

• **Duration:** 4-6 weeks

• **Intensity:** Low to moderate intensity, with progression as pain decreases and range of motion improves

• Certified Period: 02/12/2025 - 03/26/2025

Plan of Treatment

Short Term Goals

- 1. Sarah will demonstrate a 50% reduction in lower back pain (VAS 6/10 to 3/10) within 2 weeks (Target: 02/26/2025).
- 2. Sarah will increase lumbar spine flexion ROM by 10° within 2 weeks (Target: 02/26/2025).
- 3. Sarah will improve core stability and demonstrate the ability to perform basic core strengthening exercises without increased pain within 3 weeks (Target: 03/05/2025).
- 4. Sarah will demonstrate proper lifting mechanics with minimal discomfort during a mock lifting task within 3 weeks (Target: 03/05/2025).

Long Term Goals

- 1. Sarah will achieve full lumbar spine flexion, extension, and side bending ROM by the end of treatment (Target: 03/26/2025).
- 2. Sarah will demonstrate full strength and stability in the core and lumbar muscles, enabling her to perform activities of daily living without pain or functional limitation by the end of treatment (Target: 03/26/2025).
- 3. Sarah will return to normal lifting activities with correct posture and body mechanics, without pain, by the end of treatment (Target: 03/26/2025).
- 4. Sarah will demonstrate full independence in performing a home exercise program (HEP) targeting core strength and proper posture by the end of treatment (Target: 03/26/2025).

Patient Goals

- "I want to be able to bend and lift without pain."
- "I want to avoid injuring my back again when I lift heavy objects."

Potential for Achieving Goals

• Sarah is highly motivated and has a clear understanding of the importance of strengthening and proper body mechanics. She has the potential to achieve full recovery, as she demonstrates a strong commitment to following the treatment plan and adjusting to a more sustainable approach to lifting.

Participation

• Sarah is actively engaged in therapy, eager to regain full function and prevent further back injuries.

Initial Assessment / Current Level of Function & Underlying Impairments

Factors Supporting Medical Necessity

- **Referral:** Sarah was referred for physical therapy due to acute lower back pain and muscle spasm following improper lifting, impacting her daily function and mobility.
- Medical History: No significant comorbidities or prior history of chronic back pain.
- Complexities: Acute pain and muscle guarding with limited lumbar spine mobility and reduced strength in core muscles.
- Prior Treatment: Sarah has tried rest and self-care with minimal improvement.
- **Prior Living Situation:** Active lifestyle with frequent lifting tasks.
- **Discharge Plan:** Return to lifting and daily activities without pain, with proper body mechanics.
- **Prior Level of Function (PLOF):** Sarah was fully independent in activities of daily living and lifting prior to the injury.

Background Assessment

• **Precautions:** Avoid excessive bending or lifting during acute pain phase. Monitor for any signs of worsening pain or muscle strain during therapy.

Joint ROM / Goniometric Measurements

• Lumbar Flexion: 50° (Normal: 60°)

• Lumbar Extension: 10° (Normal: 20°)

• Lumbar Lateral Flexion (Right): 10° (Normal: 25°)

• Lumbar Lateral Flexion (Left): 12° (Normal: 25°)

Strength / Manual Muscle Testing

• Core Strength: 3+/5 (Fair+)

• Lumbar Flexors: 4-/5 (Fair)

• Lumbar Extensors: 3/5 (Fair)

• **Hip Flexors:** 4/5 (Good)

Balance

- Sitting Balance: Good
- **Standing Balance:** Fair, with difficulty maintaining balance during forward bending movements
- **Reactions & Strategies:** Adequate reactions to static balance tasks, but difficulty with dynamic tasks like bending or twisting.

Additional Abilities / Underlying Impairments

- Cardiopulmonary Function: Normal
- **Tone and Posture:** Mild increased muscle tone in lumbar and paraspinal muscles due to muscle guarding.
- Pain and Edema: Moderate pain (VAS 6/10) with muscle tightness and mild swelling in the lower back.
- Coordination: No significant coordination deficits noted.
- Cognition: Cognitively intact, with good insight into the need for proper lifting mechanics.

Visual Assessment

- **History and Analysis:** Acute low back pain with muscle spasm after improper lifting. No signs of neurological involvement or radiating pain.
- **Testing:** Tenderness over the lumbar paraspinal muscles, limited range of motion with pain in lumbar spine flexion and extension.

Functional Assessment

- **Lifting:** Difficulty with lifting and bending activities due to acute pain and limited ROM.
- Sitting: Pain increases with prolonged sitting or bending forward.
- Walking: Mild pain with walking, particularly after prolonged standing or activity.

Objective Tests / Measures & Additional Analysis

- Assessments:
 - Pain Severity: VAS 6/10 with pain exacerbated by bending, lifting, or prolonged sitting.
 - o **ROM Testing:** Limited lumbar flexion and extension.
 - Strength Testing: Weak core and lumbar muscles, contributing to functional limitations.
- Other: Home Exercise Program (HEP) focusing on lumbar stabilization, gentle stretches, and postural awareness.

Clinical Impressions

Sarah presents with acute lumbar strain and muscle spasm likely caused by improper lifting mechanics. With physical therapy intervention focusing on pain management, lumbar spine mobility, and core stabilization, Sarah is expected to improve quickly, with significant reductions in pain and functional limitations. Education on proper body mechanics will be key in preventing recurrence of symptoms.

Test/Measures and Outcomes

- Pain Reduction: Goal to reduce pain to VAS 3/10 or less within 2 weeks.
- **ROM Improvement:** Goal to increase lumbar flexion to 55° and extension to 15° within 4 weeks.
- **Strength Restoration:** Goal to improve core and lumbar strength to 4/5 or better by the end of treatment.
- **Functional Return:** Goal to return to full lifting ability and daily activities without pain by the end of treatment.