

Physical Therapy Treatment Plan

Patient Name: Megan Thompson

Date of Birth: 02/28/1987

Start of Care: 02/12/2025

Payer: Private Insurance

Hospitalization: No hospitalization required

Diagnosis

The patient has the following diagnoses: Med – cervical radiculopathy on the right side (M54.12), Tx – pain in the right arm (M79.601), and Tx – pain in the right hand (M79.641), all with an onset date of 02/05/2025.

Treatment Approaches

- **PT Evaluation** (Comprehensive cervical spine evaluation, upper extremity neurodynamic testing, posture analysis, and functional movements)
 - **Therapeutic Exercises** (Stretching exercises for cervical spine, thoracic spine, and shoulder; strengthening exercises for scapular stabilizers, rotator cuff, and neck musculature)
 - **Manual Therapy** (Cervical mobilizations, soft tissue mobilization for upper trapezius, levator scapulae, and suboccipital muscles)
 - **Neuromuscular Reeducation** (Improving posture, cervical spine alignment, and scapular positioning during daily activities)
 - **Neurodynamic Mobilizations** (To improve nerve gliding and reduce neural tension in the upper extremity)
 - **Modalities** (TENS for pain management, heat therapy for muscle relaxation, cold therapy for inflammation management)
 - **Postural Education** (Instruction on proper ergonomics and alignment to reduce neck strain)
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Frequency, Duration, Intensity, Certified Period

- **Frequency:** 2-3 sessions per week
- **Duration:** 6 weeks
- **Intensity:** Moderate intensity focusing on reducing pain, improving mobility, and strengthening affected musculature
- **Certified Period:** 02/12/2025 - 03/26/2025

Plan of Treatment

Short Term Goals

1. Megan will reduce pain and numbness in the right arm and hand to <4/10 during daily activities after 4 weeks (Target: 03/12/2025).
2. Megan will improve cervical spine ROM, achieving at least 25% improvement in cervical flexion, extension, and rotation by the end of 4 weeks (Target: 03/12/2025).
3. Megan will demonstrate 4/5 strength in the right scapular stabilizers (rhomboids, lower traps) by the end of 4 weeks (Target: 03/12/2025).
4. Megan will improve her posture awareness and maintain a neutral cervical spine alignment during daily tasks, as demonstrated by verbal cueing, within 4 weeks (Target: 03/12/2025).

Long Term Goals

1. Megan will experience 50% reduction in symptoms, including neck pain, arm numbness, and tingling, and be able to perform all daily activities with minimal discomfort by 03/26/2025.
2. Megan will demonstrate improved strength (5/5) in right shoulder and scapular stabilizers, allowing her to return to work and recreational activities without limitations by 03/26/2025.
3. Megan will achieve full cervical ROM (flexion, extension, rotation) without pain or discomfort by 03/26/2025.
4. Megan will be able to resume weight-bearing and lifting activities, such as lifting without symptoms, by the end of the treatment period (03/26/2025).

Patient Goals

- "I want to be able to work at my desk without pain or numbness in my arm."
- "I need to get back to lifting things without feeling pain in my neck and shoulder."

Potential for Achieving Goals

- Megan demonstrates a good potential for recovery due to her active engagement in therapy, willingness to perform prescribed exercises at home, and her relatively short duration of symptoms. She is motivated to regain full function in her neck and upper extremity and return to daily activities.

Participation

- Megan is highly motivated to participate in therapy, and she has a strong understanding of the importance of posture and ergonomics to alleviate her symptoms.

Initial Assessment / Current Level of Function & Underlying Impairments

Factors Supporting Medical Necessity

- **Referral:** Referred by primary care physician for cervical radiculopathy symptoms affecting right arm and hand following lifting injury.
- **Medical History:** No significant comorbidities; previously healthy.
- **Complexities:** Symptoms affecting functional tasks such as sitting for prolonged periods, lifting, and overhead tasks.
- **Prior Treatment:** Over-the-counter pain medications, no formal physical therapy yet.
- **Prior Living Situation:** Active professional; works in an office setting.
- **Discharge Plan:** Return to full-function, including being able to lift and perform work duties without pain, tingling, or numbness.
- **Prior Level of Function (PLOF):** No limitations in functional mobility or work-related tasks prior to onset of symptoms.

Background Assessment

- **Precautions:** Avoid heavy lifting and activities that exacerbate symptoms. Monitor for signs of worsening nerve compression or progression of symptoms.

Joint ROM / Goniometric Measurements

- **Cervical Flexion:** 30° (Limited)
- **Cervical Extension:** 40° (Limited)
- **Cervical Rotation (Right):** 45° (Limited)
- **Cervical Rotation (Left):** 50° (Normal)
- **Shoulder Flexion (Right):** 170° (Normal)

Strength / Manual Muscle Testing

- **Right Upper Trap:** 4/5 (Weak)
 - **Right Levator Scapulae:** 4/5 (Weak)
 - **Right Scapular Stabilizers (Rhomboids, Lower Traps):** 3/5 (Weak)
 - **Right Biceps:** 5/5 (Normal)
 - **Right Wrist Flexors:** 4/5 (Weak)
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Balance

- **Sitting Balance:** Normal
 - **Standing Balance:** Normal
 - **Functional Balance:** No issues with standing or dynamic balance at this time.
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Additional Abilities / Underlying Impairments

- **Cardiopulmonary Function:** Normal
 - **Tone and Posture:** Forward head posture, slight upper cervical hyperextension.
 - **Pain and Edema:** Moderate pain (5/10) in neck and right shoulder; tingling and numbness in the right arm, especially with movement.
 - **Coordination:** Normal
 - **Sensory Test Findings:** Positive for reduced sensation and tingling in right hand, particularly in the 1st, 2nd, and 3rd fingers.
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Visual Assessment

- **History and Analysis:** Forward head posture noted, contributing to cervical strain.
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Functional Assessment

- **Bed Mobility:** Independent
 - **Transfers:** Independent
 - **Gait:** Normal
 - **Functional Tasks:** Difficulty with lifting and holding items for extended periods; discomfort with desk work due to neck and arm pain.
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Objective Tests / Measures & Additional Analysis

- **Assessments:**
 - **Upper Quarter Screen (Neurodynamic Testing):** Positive for tension along right cervical spine and upper extremity, particularly with shoulder abduction and neck extension.
 - **Pain Scale:** 6/10 at rest; 7/10 during functional tasks (lifting, typing).
- **Other:** Home Exercise Program (HEP) for cervical stretches, posture correction, strengthening of scapular stabilizers, and nerve gliding exercises for the upper extremity.

Clinical Impressions

Megan presents with cervical radiculopathy likely caused by nerve compression at the cervical spine, exacerbated by poor posture and lifting mechanics. Through a combination of manual therapy, neuromuscular reeducation, and strengthening, Megan should be able to reduce pain, restore cervical mobility, and regain upper extremity function for her daily activities.

Test/Measures and Outcomes

- **Strength Testing:** Target to improve scapular strength to 5/5 and neck strength to 5/5 by the end of treatment.
- **Pain Reduction:** Target to reduce pain to <3/10 during functional activities.
- **Functional Testing:** Target for Megan to resume normal work activities without tingling or numbness.
- **Exercise Readiness:** Independent with home exercise program and posture correction techniques.