Physical Therapy Treatment Plan

Patient Name: Linda Anderson Date of Birth: 07/03/1975 Start of Care: 02/12/2025

Payer: Medicare **Hospitalization:** None

Diagnosis

The patient has the following diagnoses: Med – sciatica on the right side (M54.31) with an onset date of 02/01/2025, Tx – neuralgia, nerve root, right leg (M79.2) with an onset date of 02/01/2025, Tx – lumbago with sciatica (M54.41) with an onset date of 02/01/2025, Tx – other intervertebral disc disorder in the lumbar region with radiculopathy (M51.27) with an onset date of 02/01/2025, and Tx – other lesion of the nerve root in the right lower extremity (G57.90) with an onset date of 02/01/2025.

Treatment Approaches

- PT Evaluation
- Therapeutic Exercises (Focus on core strengthening and lumbar stabilization)
- Neuromuscular Reeducation
- Manual Therapy (Soft tissue mobilization, Joint mobilization)
- Electrical Stimulation (for pain management)
- Ice/Heat Therapy
- Postural Education and Ergonomics

Frequency, Duration, Intensity, Certified Period

- Frequency: 2-3 sessions per week
- **Duration:** 6 weeks
- Intensity: Moderate intensity with gradual increase, monitoring for pain and discomfort
- Certified Period: 02/12/2025 03/26/2025

Plan of Treatment

Short Term Goals

- 1. Linda will demonstrate a 20% reduction in pain and numbness in the right leg (target pain level: 4/10) through gentle stretches and manual therapy. (Target: 02/26/2025)
- 2. Linda will improve trunk stability and posture with minimal discomfort (1/10 pain) while performing core strengthening exercises. (Target: 02/26/2025)
- 3. Linda will be able to tolerate sitting for 20 minutes without increased numbness or pain in the right leg. (Target: 02/26/2025)
- 4. Linda will demonstrate improved flexibility in the hamstrings and lumbar spine, with a 20% increase in range of motion. (Target: 02/26/2025)

Long Term Goals

- 1. Linda will perform daily activities, including sitting, standing, and walking, without significant pain or numbness in the right leg (pain level < 2/10). (Target: 03/26/2025)
- 2. Linda will achieve full lumbar spine and hip flexibility, with no pain or tingling during motion. (Target: 03/26/2025)
- 3. Linda will improve strength in core and lower extremities (lumbar stabilization, gluteal, and hamstring muscles), achieving 5/5 strength in those muscle groups. (Target: 03/26/2025)
- 4. Linda will return to her normal work and recreational activities, including walking and prolonged sitting, without any sciatica-related symptoms. (Target: 03/26/2025)

Patient Goals

- "I want to stop feeling numbness and burning down my leg so I can sit for longer periods without discomfort."
- "I want to return to my normal routine, including walking and working, without worrying about sciatica pain."

Potential for Achieving Goals

• Linda demonstrates good rehab potential, motivated to adhere to therapy and committed to the process of managing sciatica. She has good cognitive ability to understand and follow treatment plans, as well as a high level of motivation to return to her prior level of function.

Participation

• Linda is highly motivated to achieve her goals and willing to participate fully in therapy, including performing exercises at home. She is also proactive in addressing her symptoms and understanding the importance of postural adjustments and ergonomics.

Initial Assessment / Current Level of Function & Underlying Impairments

Factors Supporting Medical Necessity

- **Referral:** Referred by primary care physician after persistent sciatica symptoms.
- **Medical History:** Recent onset of sciatica with significant pain and numbness radiating down the right leg.
- **Complexities:** Numbness, tingling, and burning sensations down the right leg with aggravation in prolonged sitting and standing positions.
- **Prior Treatment:** No formal physical therapy yet; over-the-counter medications and rest have provided limited relief.
- Prior Living Situation: Active lifestyle, enjoys gardening and long walks.
- **Discharge Plan:** Return to normal activities, including walking, gardening, and sitting for work without sciatica flare-ups.
- **Prior Level of Function (PLOF):** Prior to the onset of sciatica, Linda was independent in all daily activities and enjoyed regular physical activities.

Background Assessment

• **Precautions:** Avoid high-intensity lumbar spine flexion and twisting motions; posture and ergonomic training.

Joint ROM / Goniometric Measurements

- Lumbar Spine:
 - o Flexion: 60° (Mild limitation due to pain)
 - o Extension: 20° (Mild limitation)
 - o Side Bending: 15° (Normal)
 - o Rotation: 25° (Mild limitation)
- Hip Flexion (Right):
 - o Flexion: 100° (Normal)
- Hip Extension (Right):
 - o Extension: 15° (Normal)
- Knee ROM (Right):
 - o Flexion: 135° (Normal)
 - o Extension: Full (Normal)

Strength / Manual Muscle Testing

• Core Strength:

o Abdominals: 4/5 (Mild weakness noted)

o Erector Spinae: 4/5 (Mild weakness noted)

• Right Lower Extremity Strength:

o Hip Flexors: 4/5 (Moderate weakness)

o Gluteus Medius: 4/5 (Moderate weakness)

o Quadriceps: 5/5 (Normal)

o Hamstrings: 4/5 (Mild weakness)

o Ankle Dorsiflexors: 5/5 (Normal)

o Ankle Plantarflexors: 5/5 (Normal)

Balance

- Sitting Balance: Normal, but discomfort may arise with prolonged sitting.
- Standing Balance: Normal with slight discomfort when standing for prolonged periods.
- Balance Loss: Occasional slight loss of balance with right leg weakness when standing too long.
- Reactions & Strategies: Normal protective reactions.

Additional Abilities / Underlying Impairments

- Cardiopulmonary Function: Normal.
- **Tone and Posture:** Slight postural dysfunction with a forward head position and increased lumbar lordosis.
- Pain and Edema: Pain level reported as 5/10 at rest, 8/10 with prolonged sitting or standing.
- Coordination: Normal.
- **Sensory Test Findings:** Tingling and numbness noted along the lateral side of the right lower leg and foot.
- Cognition: Intact.

Visual Assessment

- **History and Analysis:** No visual impairments.
- Testing: WNL.

Functional Assessment

- Bed Mobility: Independent, but discomfort during rolling due to sciatica symptoms.
- Transfers: Independent.
- Gait: Mild limping on the right leg due to sciatic pain.
- Gait Analysis: Slight deviation during stance phase of right lower extremity.
- Other Areas: Difficulty with prolonged standing or sitting, especially in work or home environments.

Objective Tests / Measures & Additional Analysis

- Assessments:
 - Straight Leg Raise (SLR): Positive on right side at 30° (indicating nerve root involvement).
 - Slump Test: Positive for sciatica reproduction of symptoms.
- Other: Home Exercise Program (HEP) focusing on lumbar stabilization, hamstring stretches, and posture corrections.
- Additional Analysis:
 - o **Posture Analysis:** Forward head posture and hyperlordosis observed, potentially contributing to nerve compression.
 - **Strength Testing:** Weakness in glutes and hamstrings could contribute to lumbar instability.

Clinical Impressions

Linda presents with classic signs of sciatica, including burning pain, tingling, and numbness along the right lower extremity. The symptoms are exacerbated by prolonged sitting and standing, indicating nerve compression or irritation. Rehabilitation will focus on reducing pain and improving lumbar spine stability, flexibility, and strength, with particular emphasis on the gluteus medius, hamstrings, and core musculature. Postural re-education will also be a key component to reduce nerve irritation and enhance function.

Test/Measures and Outcomes

- **Sciatica Symptom Questionnaire:** Target to reduce pain and disability scores by 40% by the end of treatment.
- Straight Leg Raise (SLR): Target to increase range before symptom onset (currently 30°) by 20%.
- Pain Levels (VAS): Target to decrease pain from 8/10 during prolonged sitting/standing to < 2/10.
- **Strength Testing:** Target to achieve 5/5 strength in glutes, hamstrings, and core stabilizers.