

Physical Therapy Treatment Plan

Patient Name: Carlos Ramirez

Date of Birth: 04/10/1992

Start of Care: 02/12/2025

Payer: Private Insurance

Hospitalization: None

Diagnosis

The patient has the following diagnoses: Med – grade II lateral ankle sprain (S93.401A) with an onset date of 02/10/2025, and Tx – pain in the left ankle (M25.572) with an onset date of 02/10/2025.

Treatment Approaches

- **PT Evaluation** (Initial assessment of ankle range of motion (ROM), strength, swelling, and functional limitations related to the lateral ankle sprain.)
 - **Manual Therapy** (Gentle joint mobilizations for ankle mobility, soft tissue mobilization for the surrounding muscles to reduce swelling and improve circulation.)
 - **Therapeutic Exercises** (Ankle strengthening exercises, proprioception and balance training to restore function and stability to the affected ankle.)
 - **Neuromuscular Reeducation** (Balance training and coordination exercises to improve ankle stability, preventing future sprains and promoting functional movement.)
 - **Modalities** (Ice therapy for swelling and pain reduction, TENS for pain management, and compression for edema reduction.)
 - **Postural and Gait Training** (Walking mechanics education, including weight shifting and proper stance to reduce strain on the injured ankle.)
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Frequency, Duration, Intensity, Certified Period

- **Frequency:** 2-3 sessions per week
 - **Duration:** 4-6 weeks
 - **Intensity:** Low to moderate intensity, with progression as pain and swelling decrease
 - **Certified Period:** 02/12/2025 - 03/26/2025
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Plan of Treatment

Short Term Goals

1. Carlos will reduce ankle swelling by 50% within 2 weeks (Target: 02/26/2025).
2. Carlos will demonstrate a 30% improvement in active ankle dorsiflexion and plantarflexion ROM within 2 weeks (Target: 02/26/2025).
3. Carlos will be able to walk with minimal pain (VAS 3/10 or less) for short distances (10-15 minutes) within 3 weeks (Target: 03/05/2025).
4. Carlos will improve balance and stability with single-leg stance on the injured leg for 10 seconds within 3 weeks (Target: 03/05/2025).

Long Term Goals

1. Carlos will demonstrate full functional ankle ROM, including dorsiflexion and plantarflexion, within 6 weeks (Target: 03/26/2025).
2. Carlos will regain full strength in the ankle (4+/5) for activities like running, cutting, and jumping by the end of treatment (Target: 03/26/2025).
3. Carlos will return to playing soccer with no pain or instability during lateral movements and directional changes by the end of treatment (Target: 03/26/2025).
4. Carlos will demonstrate improved proprioception and balance with dynamic activities (e.g., single-leg hopping, walking on uneven surfaces) by the end of treatment (Target: 03/26/2025).

Patient Goals

- "I want to return to playing soccer without worrying about my ankle giving out."
- "I want to be able to walk and run again without pain."

Potential for Achieving Goals

- Carlos is motivated to return to soccer and is highly engaged in therapy. His history of athletic performance suggests good rehab potential, and he follows instructions well. The treatment plan includes exercises that target ankle strength and stability, which should allow him to return to his pre-injury functional level.

Participation

- Carlos is highly involved in his treatment and is committed to performing exercises at home. He actively participates in all aspects of therapy and is optimistic about returning to soccer.
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Initial Assessment / Current Level of Function & Underlying Impairments

Factors Supporting Medical Necessity

- **Referral:** Carlos was referred to physical therapy due to a Grade II lateral ankle sprain sustained during soccer. He experiences swelling, pain, and instability, particularly when walking or changing directions.
 - **Medical History:** No prior history of ankle injuries or chronic conditions.
 - **Complexities:** Current symptoms include pain, swelling, instability, and limited mobility, which affect his ability to walk and perform sports activities.
 - **Prior Treatment:** Carlos has been using R.I.C.E. (Rest, Ice, Compression, Elevation) but has not seen significant improvement without physical therapy.
 - **Prior Living Situation:** Active and athletic, playing soccer and engaging in other high-impact sports.
 - **Discharge Plan:** Full return to sports and daily activities without pain, weakness, or instability.
 - **Prior Level of Function (PLOF):** Fully independent in all activities and actively participated in competitive soccer prior to the injury.
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Background Assessment

- **Precautions:** Avoid aggressive weight-bearing and high-impact activities until swelling subsides and mobility improves. Monitor for signs of further injury or worsening pain.
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Joint ROM / Goniometric Measurements

- **Ankle Dorsiflexion:** 5° (Normal: 20°)
 - **Ankle Plantarflexion:** 15° (Normal: 45°)
 - **Inversion:** 10° (Normal: 20°)
 - **Eversion:** 5° (Normal: 15°)
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Strength / Manual Muscle Testing

- **Ankle Dorsiflexors:** 3/5 (Fair)
 - **Ankle Plantarflexors:** 4-/5 (Fair+)
 - **Ankle Invertors/Evertors:** 3+/5 (Fair+)
 - **Gastroc/Soleus:** 4/5 (Good)
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Balance

- **Sitting Balance:** Normal
 - **Standing Balance:** Moderate instability with weight shifting to the injured side
 - **Reactions & Strategies:** Reduced ability to perform dynamic balance tasks (e.g., single-leg stance, lateral movements).
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Additional Abilities / Underlying Impairments

- **Cardiopulmonary Function:** Normal
 - **Tone and Posture:** Mild edema around the ankle joint
 - **Pain and Edema:** Moderate pain (VAS 6/10) with mild to moderate swelling in the lateral ankle.
 - **Coordination:** No significant coordination deficits noted.
 - **Cognition:** Cognitively intact, good insight into the need for rehabilitation.
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Visual Assessment

- **History and Analysis:** Moderate swelling and bruising over the lateral malleolus, tender to palpation. Limited dorsiflexion and plantarflexion ROM.
 - **Testing:** Pain with palpation along the lateral ligament complex, reduced stability during functional movements like walking and lateral changes of direction.
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Functional Assessment

- **Walking:** Pain with weight-bearing and walking, particularly with heel strike and during lateral motion.
 - **Sports:** Unable to participate in soccer or quick direction changes without pain or instability.
 - **Standing/Balance:** Difficulty maintaining stability on the injured leg during weight shifts or standing for prolonged periods.
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Objective Tests / Measures & Additional Analysis

- **Assessments:**
 - **Pain Severity:** VAS 6/10 with pain exacerbated by weight-bearing and lateral movements.
 - **ROM Testing:** Limited ankle mobility, particularly in dorsiflexion and plantarflexion.
 - **Strength Testing:** Reduced strength in the dorsiflexors and evertors of the injured ankle.
 - **Other:** Home Exercise Program (HEP) focusing on ankle mobility, strengthening, and balance exercises.
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Clinical Impressions

Carlos is presenting with a Grade II lateral ankle sprain, characterized by pain, swelling, limited ROM, and instability. He is expected to improve with a comprehensive rehabilitation program targeting pain control, mobility restoration, strengthening, and proprioception. The treatment plan will also emphasize the gradual return to sports activities, particularly soccer.

Test/Measures and Outcomes

- **Pain Reduction:** Goal to reduce pain to VAS 3/10 or less within 2 weeks.
- **ROM Improvement:** Goal to restore dorsiflexion to 15° and plantarflexion to 35° within 4 weeks.
- **Strength Restoration:** Goal to improve ankle strength to 4/5 or better by the end of treatment.
- **Functional Return:** Goal to return to soccer and other sports activities without pain or instability by the end of treatment.