

## Physical Therapy Treatment Plan

**Patient Name:** Ryan Johnson

**Date of Birth:** 06/15/1992

**Start of Care:** 02/12/2025

**Payer:** Private Insurance

**Hospitalization:** No hospitalization required

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### Diagnosis

The patient has the following diagnoses: Med – iliotibial band syndrome in the right knee (M76.51) with an onset date of 01/15/2025, Tx – pain in the right knee (M79.601) with an onset date of 01/15/2025, and Tx – localized muscle weakness in the hip (M62.81) with an onset date of 01/15/2025.

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### Treatment Approaches

- **PT Evaluation** (Assessment of knee mechanics, muscle imbalances, and movement patterns during cycling)
  - **Therapeutic Exercises** (Stretching exercises for the IT band, quadriceps, hamstrings, and glutes; strengthening exercises for hip abductors, quadriceps, and core muscles)
  - **Manual Therapy** (Soft tissue mobilization for the IT band, quadriceps, and hip musculature)
  - **Neuromuscular Reeducation** (Improvement of cycling posture, pedaling mechanics, and movement patterns)
  - **Dry Needling / Myofascial Release** (For trigger points in the IT band and hip abductors)
  - **Taping Techniques** (Kinesiology taping to alleviate tension on the IT band)
  - **Modalities** (Cryotherapy for acute pain and inflammation, heat therapy for muscle relaxation)
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### Frequency, Duration, Intensity, Certified Period

- **Frequency:** 2-3 sessions per week
  - **Duration:** 6 weeks
  - **Intensity:** Moderate intensity focusing on strengthening, flexibility, and pain reduction during activity
  - **Certified Period:** 02/12/2025 - 03/26/2025
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## **Plan of Treatment**

### **Short Term Goals**

1. Ryan will reduce pain in the right knee to  $<3/10$  during cycling after 4 weeks (Target: 03/12/2025).
2. Ryan will achieve improved flexibility of the IT band, quadriceps, and hamstrings with at least 15% increase in hip and knee ROM within 4 weeks (Target: 03/12/2025).
3. Ryan will demonstrate improved hip abductor strength (4/5) and quadriceps strength (4/5) by the end of 4 weeks (Target: 03/12/2025).
4. Ryan will show improved cycling posture and pedaling mechanics with no increased pain during rides under 30 minutes within 4 weeks (Target: 03/12/2025).

### **Long Term Goals**

1. Ryan will be able to complete a 2-hour cycling session with no knee pain or discomfort by 03/26/2025.
2. Ryan will achieve full strength and endurance (5/5 in hip abductors and quadriceps) and maintain pain-free cycling sessions by 03/26/2025.
3. Ryan will be able to perform a 2-hour cycling ride with proper technique and without pain or fatigue by 03/26/2025.
4. Ryan will independently manage his symptoms with a home exercise program and self-care strategies, including foam rolling and stretching, by 03/26/2025.

### **Patient Goals**

- "I want to be able to cycle without pain, especially during longer rides."
- "I need to feel strong and stable when cycling."

### **Potential for Achieving Goals**

- Ryan demonstrates a high potential for recovery due to his active lifestyle, motivation to return to cycling, and engagement in previous exercise programs. His commitment to following the treatment plan and modifying cycling habits should aid in achieving these goals.

### **Participation**

- Ryan is committed to completing his home exercise program (HEP) and following the therapist's recommendations on proper cycling mechanics. He has a strong desire to return to cycling without pain.
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## Initial Assessment / Current Level of Function & Underlying Impairments

### Factors Supporting Medical Necessity

- **Referral:** Referred by primary care physician for IT Band Syndrome causing knee pain with cycling.
  - **Medical History:** No significant comorbidities; overall good health.
  - **Complexities:** Persistent knee pain with cycling, affecting performance and endurance.
  - **Prior Treatment:** Over-the-counter medications; no formal physical therapy.
  - **Prior Living Situation:** Active cyclist, enjoys long cycling rides and races.
  - **Discharge Plan:** Return to full-function without pain and discomfort during cycling, including the ability to ride for 2-3 hours without limitation.
  - **Prior Level of Function (PLOF):** Able to cycle for 2-3 hours without significant discomfort before symptoms began.
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### Background Assessment

- **Precautions:** Avoid prolonged or excessive cycling until progress is made.
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### Joint ROM / Goniometric Measurements

- **Right Hip Flexion:** 120° (Normal)
  - **Right Hip Abduction:** 30° (Limited)
  - **Right Knee Flexion:** 135° (Normal)
  - **Left Hip Flexion:** 130° (Normal)
  - **Left Hip Abduction:** 35° (Normal)
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### Strength / Manual Muscle Testing

- **Right Hip Abductors:** 3+/5 (Weak)
  - **Right Quadriceps:** 4/5 (Normal)
  - **Left Hip Abductors:** 5/5 (Normal)
  - **Left Quadriceps:** 5/5 (Normal)
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## Balance

- **Sitting Balance:** Normal
  - **Standing Balance:** Normal
  - **Functional Balance:** Able to stand and balance for 10-15 minutes, but pain increases with prolonged standing.
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## Additional Abilities / Underlying Impairments

- **Cardiopulmonary Function:** Normal
  - **Tone and Posture:** Normal tone, but slight hip drop noted with cycling posture.
  - **Pain and Edema:** Moderate pain (5/10) during cycling, particularly after 30 minutes. No significant swelling.
  - **Coordination:** Normal
  - **Sensory Test Findings:** No sensory deficits.
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## Visual Assessment

- **History and Analysis:** No visual impairments noted.
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## Functional Assessment

- **Bed Mobility:** Independent
  - **Transfers:** Independent
  - **Gait:** Mild antalgic gait after long rides.
  - **Functional Tasks:** Difficulty completing long cycling sessions without knee pain; performs tasks with modifications to avoid overloading the knee.
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## Objective Tests / Measures & Additional Analysis

- **Assessments:**
  - **Functional Movement Screen (FMS):** Low score due to knee pain and weak hip abductors.
  - **Pain Scale:** 6/10 after 45 minutes of cycling, with sharp burning pain along the lateral knee.
- **Other:** Home Exercise Program (HEP) for strengthening hip abductors, stretching the IT band and surrounding musculature, foam rolling, and cycling form correction.

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## Clinical Impressions

Ryan has IT Band Syndrome, likely exacerbated by poor cycling posture and imbalances in his hip musculature. With a combination of manual therapy, strengthening exercises, and cycling mechanics correction, he should be able to return to cycling pain-free.

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## Test/Measures and Outcomes

- **Strength Testing:** Target to improve right hip abductor strength to 4/5 and quadriceps strength to 5/5 by the end of treatment.
- **Pain Reduction:** Target to reduce pain to <3/10 during cycling and functional activities.
- **Functional Testing:** Target for Ryan to cycle without pain for 2 hours.
- **Exercise Readiness:** Return to normal cycling sessions without pain or restriction by the end of treatment period.