



PHYSICAL THERAPY

PHYSICAL THERAPY ASSOCIATES OF TEXAS

6860 North Dallas Pkwy, Ste 200, Plano, TX 75024

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Patient Name: Raymond Weiss
Patient DOB: 01-01-1959
Patient Sex: Male
Visit Date: 03-03-2016

Date of Accident: 03-02-2016

Visit Type: **Initial**

Accident Details

Visit: **initial**
Date: **03/02/2016**

Brief Description of Accident: Driving in center lane on North Dallas Pkwy, patient was hit on the rear passenger side of his car. He felt such a big impact that he thought he was rear-ended. He felt his body was "whiplashed". He noted instant pain in his left knee followed by headaches while he was waiting for the police. Pain started to get much worse next day.

Driving conditions: **dry**
Patient location in vehicle: **driver**
Patient wearing a seat-belt: **yes**
Did airbags deploy: **yes**
Area of Impact: **Front**
Did Patient see accident about to occur: **yes**
Did patient brace for impact: **yes**
Was The Patient Car Moving: **yes**
How fast: **45 mph**
Was the other vehicle moving: **yes**
Head position at time of impact: **Looking straight**
Did patient hit body parts on auto: **Left knee**
Did patient had a pre-existing complaint: **no**
Has patient been in accident before: **no**
Did patient go to the hospital or urgent care: **yes**
Did patient suffer any cuts, scrapes, or bruises: **no**
Were x-rays taken: **yes**
Is patient working at current time: **yes**

Subjective

Knee Pain

Patient presents with **Knee Pain**. -Left side
Onset: **sudden**.

On a scale of 1 to 10, with 10 being the worst pain, the patient rates it as **7**.

Aggravating Factors: **standing, walking, going up stairs and carrying things**.

Alleviating factors: **analgesic medications, heat, lying down and muscle relaxers**.

Associated symptoms are **loss of motion, loss of strength and trouble walking**.

MEDICAL HISTORY: Patient has a history of **no medical symptoms**.

FAMILY HISTORY: Father has history of **alzheimer's disease**. Mother has history of **epilepsy**.

SOCIAL HISTORY: Alcohol consumption is **social**. Patient is **current every day smoker**. Smoking **2** pack/day. Patient works as **school teacher**.

SURGICAL HISTORY: **Patient has no significant past surgical history**.

ROS

Constitutional **no constitutional symptoms**

Musculoskeletal **no musculoskeletal symptoms** except the ones noted above.

Respiratory **no respiratory symptoms**

CVS **no CVS symptoms**

Endocrine **no endocrine symptoms**

GI **no GIT symptoms**

GU **no GU symptoms**

Neurological **no neurological symptoms**

Psychiatric **no psychiatric symptoms**

Skin **no skin symptoms**

Objective

Height is **70** inches.

Weight is **175** lbs.

BMI: **25.11**.

Patient is alert and oriented X3.

Cervical ROM:

Flexion (0-50): **no pain**.

Extension (0-60): **no pain**.

Lt Lat Flexion (0-45): **no pain**.

Rt Lat Flexion (0-45): **no pain**.

Lt Rotation (0-80): **no pain**.

Rt Rotation (0-80): **no pain**.

Lumbopelvic ROM:

Flexion (0-90): **no pain**

Extension (0-25): **no pain**

Lt Lat Flexion (0-25): **normal**

Rt Lat Flexion (0-25): **normal**

Lt Rotation: **normal**

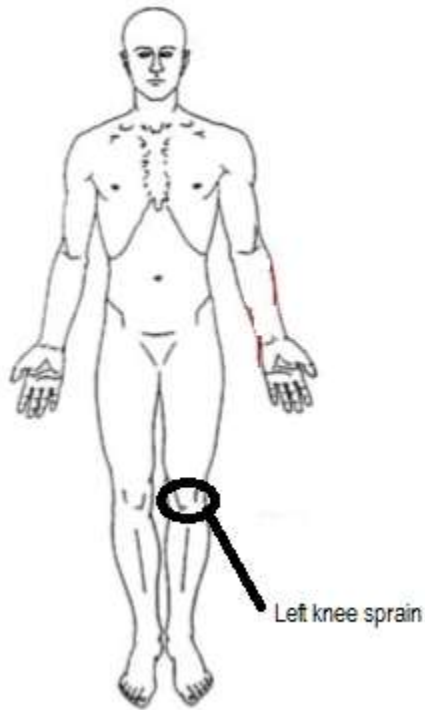
Rt Rotation: **normal**

Extremity Examination:

Knee

Flexion (0-110): **pain**.

Extension (0): **pain**



Knee ortho tests: Abduction Stress: [left](#). Lachmans: [left](#). Adduction Stress: [left](#). McMurray: [left](#). Apleys Compression: [left](#). Apley Distraction: [left](#). Patella Ballottement : [left](#). Patella Grinding: [left](#). Valgus Stress: [left](#). Varus Stress: [left](#)

Dermatomes C5-T1:

Lt C5: [normal](#).
 Rt C5: [normal](#).
 Lt C6: [normal](#).
 Rt C6: [normal](#).
 Lt C7: [normal](#).
 Rt C7: [normal](#).
 Lt C8: [normal](#).
 Rt C8: [normal](#).
 Lt T1: [normal](#).
 Rt T1: [normal](#).

Dermatomes L3-S1:

Lt L3: [normal](#).
 Rt L3: [normal](#).
 Lt L4: [normal](#).
 Rt L4: [normal](#).
 Lt L5: [normal](#).
 Rt L5: [normal](#).
 Lt S1: [normal](#).
 Rt S1: [normal](#).

Reflexs C5 C6 C7:

Lt C5 Biceps: [2+ Active](#).
 Rt C5 Biceps: [2+ Active](#).
 Lt C6 Brachioradialis: [2+ Active](#).
 Rt C6 Brachioradialis: [2+ Active](#).
 Lt C7 Triceps: [2+ Active](#).

Rt C7 Triceps: 2+ Active.

Reflexes L4 S1:

Lt L4 Patellar: 0 - No response.

Rt L4 Patellar: 0 - No response.

Lt S1 Achilles: 0 - No response.

Rt S1 Achilles: 0 - No response.

Gait: Abnormal. Antalgia: Normal.

Assessment

Pain In Unspecified Knee (M25.569) Left knee

Person Injured In Unsp Motor-Vehicle Acc, Traffic, Sequela (V89.2XXS)

Sprain Of Unsp Cruciate Ligament Of Unsp Knee, Sequela (S83.509S) Left knee

Plan

Hot/Cold

Mechanical Traction

Therapeutic Exercise

Strength/Stabilizer

Neuromuscular Reeducation

Therapeutic Massage

Mobilization

Functional Activity

Short Term Goals (In 4 weeks): Decrease pain by 50%, Decrease spasm, Decrease radicular pain, numbness & tingling, Decrease inflammation, Increase ROM by 10 degrees, Improve safety awareness, Increase strength by 2 grades, Improve gait, Improve posture, Improve balance, Independence w/HEP and Pain free ADL & IADL

Long Term Goals: Return to independence w/ADL & IADL, Increase ROM to affected body parts w/full function potential, Perform ADL & IADL without pain or difficulty, Demonstrate independence in HEP and Increase strength to affected body parts to full

4 office visits per week for 4 weeks. Re-evaluate in 5 weeks.

Gait Training stressed.

Prognosis: Good/Progressing

Decrease pain by 75.

Increase ROM by 50.

Work Status: Patient needs ability to take breaks when necessary due to pain

Refer to Neurologist

Procedure

Therapeutic Massage

Gait Training

Functional Activity

Mobilization

Mechanical Traction

Hot/Cold

Therapeutic Exercise
Strength/Stabilizer
Neuromuscular Reeducation

The visit was electronically signed off by Kristen Lager, PT on 03/07/2016 10:33:38 PM