

**PT DAILY TREATMENT NOTE**

**9026361 - Terence Cardinal Cooke Health Care Center-6361**

<b>PATIENT</b> [REDACTED]	<b>ID</b> [REDACTED]	<b>PAYOR</b> Medicare Part A	<b>PAGE</b> 1
<b>PHYSICIAN</b> Taitt, Michael	<b>MED DX1</b> 715.90 OSTEOARTHROS NOS-UNSPEC		<b>January 2012</b>
<b>TREATMENT DX1</b> 719.7 DIFFICULTY IN WALKING		<b>TREATMENT DX2</b> 728.87 MUSCLE WEAKNESS	
<b>START OF CARE</b> 01/14/2012	<b>END OF CARE</b> 02/09/2012	<b>MED DX ONSET 1</b> 01/10/2012	
<b>MED DX 2</b> V43.65 JOINT REPLACED KNEE		<b>MED DX ONSET 2</b> 01/10/2012	

DATE	01/08/2012	01/09/2012	01/10/2012	01/11/2012	01/12/2012	01/13/2012	01/14/2012
CPT Codes	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
97001 PT evaluation	QTY						1
	MIN						30
	MOD						
	MOD						
	INIT						(E
97112 Neuromuscular reeducation	QTY						1
	MIN						15
	MOD						
	MOD						
	INIT						(E
97116 Gait training	QTY						1
	MIN						15
	MOD						-59
	MOD						
	INIT						(E
97530 Therapeutic activities	QTY						1
	MIN						15
	MOD						
	MOD						
	INIT						(E
<b>CONCURRENT MIN.</b>							
<b>CO-TREATMENT</b>							
<b>TOTAL MIN.</b>							<b>75</b>
<b>COUNTER INITIALS</b>							

**Date:** 01/14/2012

**97001 Note Electronically Signed by Therapist:** (TCC)Dennis Ecal, PT (01/14/2012)  
**Note:** PT evaluation completed. Plan of care developed and skilled treatment recommended for bed mobility, balance, transfers, ambulation.

**97112 Note Electronically Signed by Therapist:** (TCC)Dennis Ecal, PT (01/14/2012)  
**Note:** Trained in progression of sitting to standing during functional activities with min assist. Instructed in compensatory strategy instruction for proximal stability to improve stndg balance. Establishment and maintenance of balance through balance recovery strategies.

**97116 Note Electronically Signed by Therapist:** (TCC)Dennis Ecal, PT (01/14/2012)  
**Note:** Patient ambulated 10 feet using a rolling walker with min assist. Instructions to increase BOS for balance safety throughout gait cycle. Required enough pacing to complete tx session

**97530 Note Electronically Signed by Therapist:** (TCC)Dennis Ecal, PT (01/14/2012)  
**Note:** Patient required min assist to get from supine to sitting. Facilitation of postural alignment to improve sit to stand activity. Instruction in hand and foot placement to improve transfers with min assist.

Attestation: I agree, and it is my intent, to sign this record/document and affirmation of electronic signature for electronic submission and printed record/document. I understand that my signing and submitting this record/document in this fashion is the legal equivalent of having placed my handwritten signature on the submitted record/document and this affirmation. I understand and agree that by electronically signing and submitting this record/document in this fashion I am affirming to the truth of the information contained therein.

Rehab Personnel Electronic Signature	Initials	Rehab Personnel Electronic Signature	Initials	Rehab Personnel Electronic Signature	Initials
(TCC)Dennis Ecal, PT	(E				