

Morris, Robert

Name: Abadeza, Daniel **Primary:** Partnership
PAN: 17624 **Secondary:**
Date of Service: 06/01/2007

Diagnosis**Procedures**

839 OT DISLOCATION	12345 Test for notes
839.21 DISLOCAT THORACIC VERT CLOSE	
847 SPRAINS OT/UNSPEC BACK	
723.1 CERVICALGIA	

Date of Accident: 05/01/2007

History of Occurrence:

On Saturday, May 14, 2005, Mrs. Patient was involved in a vehicle accident. Mrs. Patient stated upon her visit that she was involved in a vehicle accident while riding in the driver's front seat of a mid-size car. The vehicle was creeping at an estimate of 25 miles per hour. Her vehicle's point of impact was the rear bumper. The road was dry, and the visibility was excellent, with bright sunlight.

There were a total of 2 vehicles involved in the accident. The other vehicle hit the patient's vehicle. The other vehicle's point of impact was the front bumper.

The accident occurred at approximately 2 pm. No police report was filed. The head rest was properly adjusted at the time of the accident. Mrs. Patient was using seat belts with shoulder harness as seat restraints. Mrs. Patient was prepared for the collision impact. Mrs. Patient's head and neck were straight ahead just prior to the accident. She did not lose consciousness after the injury. Mrs. Patient did not receive emergency care at the accident scene.

The other vehicle was a mini van. It was traveling at a speed of 30. It was accelerating. Its point of impact was the front bumper. This other vehicle was slowing for traffic congestion. Mrs. Patient was asked to determine her opinion of her current condition status. Based on a 1 to 10 pain scale, Mrs. Patient estimated her neck pain at 6.0, upper back pain at 6.0, and headache at 8.0.

Subjective Complaints:

The patient stated on her visit today that there is moderately severe constant pain experienced in the right neck area. She additionally reported constant moderately severe pins and needle sensations with achy pain radiating to the posterior right upper shoulder, right deltoid area, and right postero-lateral biceps. Additionally, she stated that she has constant moderately severe pain on the right in the upper back area. She reported that she has developed a severe frequent headache pain.

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Mrs. Patient was asked to determine her opinion of her current condition status. Based on a 1 to 10 pain scale, Mrs. Patient estimated her neck pain at 6.0, upper back pain at 6.0, and headache at 8.0.

Family History:

Mrs. Patient is married. Mrs. Patient's spouse is employed as a teacher. She has two boys and one girl. Both of her parents are alive.

General Physical Examination:

Upon observation of Mrs. Patient's walk, it was noticed to be normal. Her movement is restricted cervical movement. Mrs. Patient's build can be described as medium and her physical fitness can be described as fair. Mrs. Patient's posture is best described as guarded and right anterolateral flexion antalgia. Mrs. Patient's mental state was noted to be nervous.

X-Ray Evaluations:

None at this time.

Spinal Examination:

A posterior subluxation of C1 on the right was observed with a moderate fixation of the spinal joints. Cervical segment C5 is found to be in a left posterior malaligned position with a moderate degree of fixation. There is a posterior rotation of T1 on the right with a fixation of a moderate degree. The spinal joints were checked for aberrant motion and a moderate amount of spinal joint fixation at T8 was noted. A fairly severe pain at C1 to T1 on the right was revealed by palpation examination.

Orthopedic and Neurological Examinations:

The following tests were performed. Biceps reflex is normal grade 2 bilaterally, brachioradialis reflex is normal grade 2 bilaterally, triceps reflex is normal grade 1 on the right, cervical compression is positive on the right, distraction test is positive, maximum rotary cervical compression is positive on the right, and shoulder depression test is positive on the right.

Range of Motion Examination:

	Normal (Degree)	Patient (Degree)	Pain level:
CERVICAL ROM:			
Flexion	50	30	3
Extension	60	40	3
Right Lateral Flexion	45	Normal	1
Left Lateral Flexion	45	40	1
Right Rotation	80	60	2
Left Rotation	80	50	3

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Prognosis:

Mrs. Patient's overall prognosis is fair.

The probability of complete relief within three months is moderate. Mrs. Patient's prognosis may be complicated by age and overall health.

Assessment:

Mrs. Patient is determined to be at an overall status of acute.

Treatment Therapy Plan:

To reduce subluxation of the segments and also to help improve mobility, the full spine region received manipulation. Electrical muscle stimulation was given to the neck area, and thoracic spine. The effect is to induce muscle relaxation and decongest the tissue.

Activities of Daily Living:

An Activities of Daily Living questionnaire was completed by Mrs. Patient. Those affected by her condition are as follows:

General:

- Sleeping
- Exercising
- Chewing
- Lifting children
- Lying in bed
- Using computer