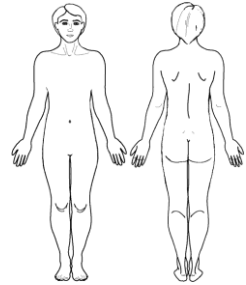


Name: _____ DOB: _____ Date: _____

1. What brings you here today and what is your goal?
2. List exercises and self-care you are doing (how much/how often).
3. What is working?
4. What isn't working?
5. What else should Dr Boothby know?
6. Do you have any new injuries?
7. What are your questions?
8. List changes in medications since last treatment (include vits, herbs & over counter)

Please indicate area(s) of concern.



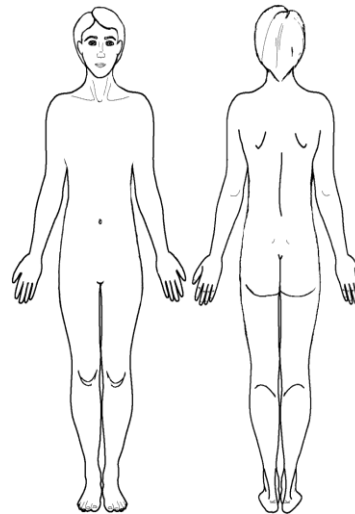
Pain Quality
 A-Ache
 S-Sharp
 B-Burning
 N-Numbness
 P-Pins & Needles
 O-Other

Frequency Of Pain
 ___ Daily
 ___ Hourly
 ___ Other

Rate your severity of pain in the past week.
 ← No Pain Pain as bad as it could be →
 |-----|

Rate your ability to perform daily tasks.
 ← Optimal Unable →
 |-----|

PHYSICAL EXAMINATION



- Diagnosis:**
Somatic Dysfunction
 M99.00 Head
 M99.01 Cervical
 M99.02 Thoracic
 M99.03 Lumbar
 M99.04 Sacral
 M99.05 Pelvic
 M99.06 Lower Extremity
 M99.07 Upper Extremity
 M99.08 Rib Cage
 M99.09 Abdomen
 M53.2x1 Spinal instab. occ/at/ax
 M53.3 Sacrococcygeal instab.
 M62.9 Disorder Muscle unspc.
 M79.7 Fibromyositis
 S13.100A Sublux unspc cervicle
 S23.100A Sublux unspc thor
 S33/100A Sublux unspc lumbar
 M99.18 Sublux complex ribcage
- Symptoms**
 G89.11 Acute pain due to trauma
 M54.2 Cervicalgia
 M54.6 Thoracic pain
 M54.5 Lumbar pain
 M25.50+ Pain stiffness (pg 193)
 M43.6 Torticollis
 R68.84 Jaw Pain
 M26.60 TMJ syndrome
 M54.3 Sciatica
 M62.50 Muscle wasting/ atrophy
 H93.1 Vertigo
 H93.1 Tinnitus
 G43+ Migraine (pg 140)
 G44.209 Tension HA-not intract.
 R51 Headache
 R25.0 Abnormal head movment
 R25.1 Tremor
 R25.2 Cramp and spasm
 R25.3 Fasciculation
 R26.89 Abnormal gait mobility
 R27.9 Lack of Coordination
 R62.50 Delayed Development
 K21.0 Acid reflux GERD
 P78.83 Newborn reflux
 R11.0 Nausea
 G90.8 Other autonomic dis.
 H51.11 Convergence Insuff.
 H51.9 Eye movement disorder
 S06.0x0A Concussion w/o Loss Of Consciousness
 F07.81 Post-concussion synd.

Spinal Restrictions

Extremity Restrictions

Plan:

- L OCC R
- C1
- C2
- C3
- C4
- C5
- C6
- C7
- R1 T1 R1
- R2 T2 R2
- R3 T3 R3
- R4 T4 R4
- R5 T5 R5
- R6 T6 R6
- R7 T7 R7
- R8 T8 R8
- R9 T9 R9
- R10 T10 R10
- R11 T11 R11
- R12 T12 R12
- L1
- L2
- L3
- L4
- L5
- S1
- S2 Iliac
- S3 Iliac
- S4
- Coccyx
- Sternal

- L R Foot
- L R Ankle
- L R Tibia
- L R Fibula
- L R Patella
- L R Knee
- L R Femur
- L R Hip
- L R Hand
- L R Wrist
- L R Radius
- L R Ulna
- L R Elbow
- L R Humerus
- L R Glenohumeral
- L R AC
- L R Scapula
- L R Clavicle
- CRANIAL RESTRICTION**
- L R Occiput
- L R Frontal
- L R Parietal
- L R Sphenoid
- L R Temporal
- L R Zygoma
- L R Maxilla
- L R Nasarium
- L R TMJ/Mandible
- L R Tentorium
- Vomer
- Falx
- Hyoid

TREATMENT

- 98940.....CMT 1-2 regions
- 98941.....CMT 3-4 regions
- 98942.....CMT 5 regions
- 98943.....ext. spinal
- 97110 59-XS.....Therapeutic Exercises 15min
- 97110 59-XS 52.....Therapeutic Exercises 8min
- 97124.....Massage Therapy
- 97012.....Mechanical Traction
- 97112 59-XS.....Neuromuscular Re-ed 15min
- 97112 59-XS 52.....Neuromuscular Re-ed 8min
- 97140 59-XS.....Myofascial Release 15min
- 97140 59-XS 52.....Myofascial Release 8min
- 95851.....ROM & report
- 99070.....Supplements/Supports

ABBREVIATION KEY

- A..... ArthroStim
- AR..... Adhesion Release
- C..... Cranial Adjustment
- MFR..... Myofascial Release
- O..... OsseousAdjustment
- STM..... Soft Tissue Massage
- T..... Toggle
- V..... VibraCussor
- HA..... Headache

Sprains

- S13.4xxA Cervical
- S23.3xxA Thoracic
- S23.41xA Ribs
- S23.42+ Sternum (pg 269)
- S33.5xxA Lumbar
- S33.6xxA Sacroiliac Joint
- S33.8xxA Sprain of other parts of lumbar spine and pelvis (Coccyx/pubic joint)
- S43.40__A Shoulder
- S43.42__A Rotator Cuff
- S53.40__A Elbow
- S63.50__A Wrist
- S83.8x__A Knee
- S93.40__A Ankle

Strains

- S16.1xxA Neck
- S29.011A Thoracic front
- S29.012A Thoracic back
- S39.011A Abdomen
- S39.012A Low back
- S34.4xxA Lumbosacral plex
- S39.013A Pelvis
- S34.5xxA Lumbar sacral and pelvic sympathetic nerves
- S46.81__A Strain upper arm
- S46.01__A Shoulder rotator
- S46.11__A Long head bicep
- S46.31__A Triceps
- S96.90__A Ankle/foot

EXAM/COUNSELING

- N-99201-25...E-99212-25...Limited
- N-99202-25...E-99213-25...Expanded
- N-99203-25...E-99214-25...Detailed
- N-99204-25...E-99215-25...Therapv

TIME: 15 30 45 60

Amount Paid \$ _____

__(1=R 2=L) += See Page Number