

[Name of HH Agency]

Phone:

Fax:

## PHYSICAL THERAPY DISCHARGE SUMMARY

EPISODE: 07/18/14 - 09/15/14

09/12/14

**PHYSICIAN:**

**PHONE:**

**FAX:**

**PATIENT:**

**DOB:**

### Reason for Discharge

End of certification period

### Physical Therapy Goals Achieved

- 1 Patient will improve sit to stand transfer from electric recliner to max A within 6 weeks.
- 2 PCG to be able to verbalize fall recovery techniques as evidenced by PCG explaining when and when not to assist with fall recovery using good body mechanics and safety precautions within 6 weeks.

### Physical Therapy Goals not Achieved

- 1 Patient's endurance will improve to a Fair level as evidenced by patient being able to tolerate 30 minutes of moderate physical exertion with 5-6 one minute rest breaks within 6 weeks.  
09/12/14  
Pt requires 7 one min rest breaks during 30 min of moderate physical exertion.  
09/10/14  
Pt requires 7 one min rest breaks during 30 min of moderate physical exertion.  
09/04/14  
Pt requires 8 one min rest breaks during 30 min of moderate physical exertion.  
09/02/14  
Pt requires 9 one min rest breaks during 30 min of moderate physical exertion.  
08/28/14  
Pt requires 9 one min rest breaks during 30 min of moderate physical exertion.  
08/26/14  
Pt requires 9 one min rest breaks during 30 min of moderate physical exertion.  
08/21/14  
Pt requires 10 one min rest breaks during 30 min of moderate physical exertion.  
08/19/14  
Pt requires 8 one min rest breaks during 30 min of moderate physical exertion.  
08/12/14  
Pt requires 8 one min rest breaks during 30 min of moderate physical exertion.  
08/07/14  
Pt requires 8 one min rest breaks during 30 min of moderate physical exertion.  
07/31/14  
Pt requires 9 one min rest breaks during 30 min of moderate physical exertion.  
07/29/14  
Pt requires 10 one min rest breaks during 30 min of moderate physical exertion.  
07/24/14  
>10 one min rest breaks during PT visit
- 2 Patient will improve bed mobility to mod A so patient can perform skin pressure relief and assist with bed oriented self-care tasks within 6 weeks.  
09/12/14  
Max A w/ roll/turn. Max A w/ sit to supine. Dependent w/ supine to sit.  
09/10/14  
Max A w/ roll/turn. Max A w/ sit to supine. Dependent w/ supine to sit.

09/02/14  
Max A w/ roll/turn. Max A w/ sit to supine.  
Dependent w/ supine to sit.  
08/21/14  
max A  
08/19/14  
max A  
07/29/14  
max A  
07/22/14  
max A

**Functional Status at Discharge**

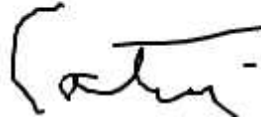
Max A required for all ADLs, transfers, bed mobility. Pt unable to walk.

**Post Discharge Needs**

continue with HEP

Pt going to see MDs at Cedars-Sinai medical center to diagnose condition (possible ALS).

COMPLETED AND ELECTRONICALLY SIGNED BY \_\_\_\_\_, PT



PATIENT'S SIGNATURE:

PHYSICIAN'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_