

**Chart Notes**

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

<b>Patient:</b> Blaine, Cindy	<b>DOB:</b> 05/26/1963	
<b>Ins Co</b>	<b>Pol #</b>	<b>Insured</b>
<b>Date</b> 06/05/2017		
<b>Provider</b> Dr. Jacob Young		

**Subjective:**

Ms. Cindy Blaine entered the office today for complaint(s) resulting from a OTHER car vs 18 wheeler loaded incident having completed the patient intake questionnaire. The questionnaire was reviewed and annotated by the examining provider as needed. The completed questionnaire is in the patient's permanent digital file and available for review. She signed consent for evaluation and possible treatment of injuries sustained as the result of the accident that occurred on or about 06/05/2017.

**Mechanism of Injury:**

Cindy was positioned as driver of the vehicle, and when questioned about wearing seatbelts, she replied she was restrained. An air bag did not deploy. Cindy reports that she was looking ahead, but cannot be certain at the time of the impact. Cindy did strike back of head/neck, front of head, left shoulder, left leg, left knee, right chest/flank, right foot and right knee against the dashboard, headrest, seat and steering wheel. Patient related she did receive a head injury and did not lose consciousness.

The patient's vehicle impact location was on the rear end. The patient's vehicle movement was stopped. Estimated speed of patient's vehicle was not moving (0 MPH). The damage assessment of the patient's vehicle was heavy visible damage and totaled. The other vehicle's movement was described as moving forward with an estimated speed noted as moving at a moderate speed (between 25 and 40 MPH). Estimated damage assessment of the other vehicle was unknown. The patient's vehicle was towed from the scene.

Police did arrive at the scene and an accident report was completed. EMS was at the scene. Cindy was transported to the local hospital from the scene and the following has occurred: not treated since accident. Patient complains at the time of the accident she felt aching, burning, sharp, "shock like", "stiffness" and throbbing at the neck, front of neck, back of neck, central low back, chest, front of ribs, front of right upper extremity, front of left shoulder, front of right wrist, rear of right wrist, front of right hand, rear of right hand, front of right lower extremity, front of left lower extremity, front of left hip, rear of left hip, front of right knee, rear of right knee, front of left knee and top of right foot and supplemental complaints of anxiety, breathing difficulty, chest pain, disbelief, gluteal pain, muscle spasm, numbness and tingling, shock, sleeping difficulty, soreness and upset. Cindy states that since the date of the accident the overall condition and complaints have deteriorated daily functioning at work/home.

**HISTORY:**

**Chief Complaint:** an acute right anterior pelvis/hip, left anterior pelvis/hip, right anterior thigh, left anterior thigh, right dorsal foot, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh complaint due to the accident on 01/25/2017.

- **Frequency/Quality:** Constant discomfort described as aching, burning, intolerable and stabbing
- **Radiation of symptoms:** radiating to front of left thigh and radiating to back of left thigh
- **Change in complaint/VAS:** Complaint has stayed the same since the onset and the pain scale is presently rated 10/10 (10/10 being most severe).
- **Modifying factors:** Relieved by: nothing and aggravated by: almost any movement
- **Previous episodes:** denies past episodes
- **Previous care:** nothing
- **Recent Diagnostic tests:** Yes CT was neg
- **ADL/Functional Deficits:** Explains employment has become difficult due to bending over, concentrating, exercising, getting in/out of car, getting to sleep, lifting objects, reaching overhead, rising out of chair or bed, sitting, standing, staying asleep, using a computer and walking when she does this for more than 3 minutes.

# Chart Notes

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

Patient: Blaine, Cindy

DOB: 05/26/1963

Ins Co

Pol #

Insured

Date 06/05/2017

Provider Dr. Jacob Young

\*\*\* continued from previous page \*\*\*

**Complaint #2:** a recurring posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left mid thoracic, mid thoracic and right mid thoracic complaint due to the accident on 01/25/2017.

- **Frequency/Quality:** Constant discomfort described as aching and dull
  - **Radiation of symptoms:** non-radiating
  - **Change in complaint/VAS:** Complaint has stayed the same since the onset and the pain scale is presently rated 7/10 (10/10 being most severe).
  - **Modifying factors:** Relieved by: nothing and aggravated by: almost any movement
  - **Previous episodes:** confirms past episodes
  - **Previous care:** nothing
  - **Recent Diagnostic tests:** No
  - **ADL/Functional Deficits:** Explains employment has become difficult due to bending over, concentrating, getting to sleep, lifting objects, looking over shoulder, reaching overhead, sitting, standing, staying asleep and using a computer when she does this for more than 3 minutes.
- No additional concerns related by patient.

**Systems Review:** Cindy reports status of condition(s) below which may relate to complaint(s):

- **Musculoskeletal:** Other than presenting musculoskeletal complaints patient reports arthritis, back problems, foot/ankle pain, hip disorders, joint or muscle pains/stiffness, knee injuries, neck pain and poor posture.
- **Neurological:** Other than presenting complaints patient reports depression, difficulty concentrating, dizziness, sleeping issues and weak muscles.
- **Head & ENT:** Reports no head and ENT complaints.
- **Cardiovascular:** Reports no cardiovascular complaints.
- **Respiratory:** Reports no respiratory complaints.
- **Gastrointestinal:** Reports no gastrointestinal complaints.
- **Genitourinary:** Reports no genitourinary complaints.
- **Endocrine:** Reports no endocrine complaints.
- **Derma./Hemo:** Reports no dermatological or hemopoietic complaints.

### Past, Family and Social History:

#### - Past Health History:

- **Surgery:** gall bladder removed, hysterectomy- complete, knee left and knee right
- **Medications:** anti-depressant and steroidal anti-inflammatory
- **Illnesses:** Denies Hx of diabetes, cancer, hypertension and progressive neurological disorders
- **Accidents:** multiple automobile accidents

#### - Family and Social History:

- **Family History:** cancer - , arthritis, diabetes, high blood pressure and osteoarthritis.
- **Work Habits:** full-time and difficult.
- **Social Habits:** No change in social habits since injury and current every day smoker.
- **Exercise Habits:** almost nothing, too much pain.
- **Diet and Nutrition:** no changes in diet or nutrition, unrestricted, 2 to 3 meals a day and balanced.

### Objective:

### EXAMINATION:

- Age/Gender/DOB: , , born BirthDate

**Constitutional:** obese, clean/neat, well-dressed and well-groomed

- Vital Signs:

Height: 66 Weight: 274 lbs. Pulse: 91 bpm. BP: 127/86, mm/Hg right arm.

**Chart Notes**

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

<b>Patient:</b> Blaine, Cindy	<b>DOB:</b> 05/26/1963
<b>Ins Co</b>	<b>Pol #</b> <b>Insured</b>

**Date** 06/05/2017

**Provider** Dr. Jacob Young **\*\*\* continued from previous page \*\*\***

- Appearance: in pain

**Ortho-Cervical Compression** performed bilaterally. Patient indicated pain that was moderate on the left and right, greater on the right at C5/C6, C6/C7 and C7/T1 with radiation.

**Ortho-Shoulder Depression** performed bilaterally. Patient indicated pain that was moderate on the left and right, greater on the right at C5/C6, C6/C7 and C7/T1 with local pain that radiates.

**Ortho-Distracton Test** performed, patient indicated relief of segmental level pain and radiating pain .

**Ortho-Soto Hall Test** performed. Patient indicated no pain.

**Ortho-Cranial Nerve Test: CNI-CNXII WNL**

**Ortho-Straight Leg Raiser Test** performed bilaterally. Patient indicated severe pain on the bilateral lumbo-sacral joint, sacro-iliac joint and sciatic notch to thigh at 10 degrees.

**Ortho-Slump's test** performed bilaterally. Patient indicated no pain.

**Ortho-Bechterew's test** performed bilaterally. Patient indicated severe on the left sciatic notch to thigh at 10 degrees.

**Ortho-Kemp's Test** was performed bilaterally. Patient indicated moderate to severe segmental level pain at L4, L5, sacrum and left pelvis without radiation.

**Ortho-Double Leg Raiser Test** performed. Patient indicated severe pain on the left and right (equal) lumbo-sacral joint and sacro-iliac joint <10 degrees.

**Ortho-Ely's Test** performed. Patient indicated no pain bilaterally. **Ortho-Iliac Compression Test** performed bilaterally. Patient indicated increased S.I. joint pain that was severe on the left and right, greater on the left.

**Ortho-Nachlas' Test** performed. Patient indicated no pain bilaterally.

**Ortho-Yeoman's test** performed. Patient indicated no pain bilaterally.

**Ortho-FABERE/Patrick's Test** was performed bilaterally. Patient complained of severe pain at the left and right, greater on the left hip joint.

**Neuro-Deep Tendon Reflexes** (normal 2+):

- *Biceps* Left 2+, Right 2+,
- *Triceps* Left 2+, Right 2+,
- *Brachioradialis* Left 2+, Right 2+,
- *Patellar* Left somewhat diminished, Right somewhat diminished,
- *Achilles* Left somewhat diminished, Right somewhat diminished,

**Neuro-Upper extremity resistive isometric motor testing** (normal 5/5):

- Shoulder Elevation: Left: 5 / 5 Right: 5 / 5.
- Deltoid: Left: 5 / 5 Right: 5 / 5
- Biceps: Left: 5 / 5 Right: 5 / 5
- Triceps: Left: 5 / 5 Right: 5 / 5
- Wrist Flexors: Left: 5 / 5 Right: 5 / 5
- Wrist Extensors: Left: 5 / 5 Right: 5 / 5
- Finger Extensors: Left: 5 / 5 Right: 5 / 5
- Finger Flexors: Left: 5 / 5 Right: 5 / 5
- Finger Abductors: Left: 5 / 5 Right: 5 / 5
- Palmar Interossei: Left: 5 / 5 Right: 5 / 5

**Neuro-Lower extremity resistive isometric motor testing** (normal 5/5):

- Iliopsoas: Left: 5 / 5 Right: 5 / 5
- Quadriceps: Left: 5 / 5 Right: 5 / 5
- Anterior Tibialis: Left: 5 / 5 Right: 5 / 5
- Hallucis Longus: Left: 5 / 5 Right: 5 / 5
- Ext Digitorum Longus & Brevis: Left: 5 / 5 Right: 5 / 5
- Gluteus Medius: Left: 5 / 5 Right: 5 / 5

**Musculoskeletal**

- *Gait and Station:* normal gait and normal balance

**Musculoskeletal**

## Chart Notes

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

Patient: Blaine, Cindy

DOB: 05/26/1963

Ins Co

Pol #

Insured

Date 06/05/2017

Provider Dr. Jacob Young

\*\*\* continued from previous page \*\*\*

- *Inspection/Perussion +/or Palpation*: right anterior pelvis/hip, left anterior pelvis/hip, right anterior knee, right dorsal foot, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock, left posterior thigh and right posterior thigh

- *Postural Analysis*: short right leg (pelvic deficiency), head forward flexed, head rotation right, high left shoulder, thoracic hyperkyphosis and high left hip.

- *Spinal Stability/Restriction(s)/Subluxation(s)*: C2, C6, T2, T6, T10, L1, L5, sacrum and left pelvis

- *Extraspinal restrictions/subluxations*: N/A (no other subluxations were noted).

- *Muscle Strength and Tone*: moderate to severe muscle spasms in the following areas; posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral and right posterior pelvis/hip.

### Musculoskeletal - Range of Motion - Thoraco-Lumbar - Active

-Flexion: 75/90 degrees with pain

-Extension: 20/30 degrees with pain

-Left Lat. Flexion: 20/35 degrees with pain, stiffness and radiation

-Right Lat. Flexion: 30/35 degrees with pain

-Left Rotation: 30/30 degrees with pain

-Right Rotation: 30/30 degrees with pain

### Function Movement Assessment:

Core Strength- 1/4

Core Flexibility- 0/4

### Radiographs:

- Rationale: Based upon the patient's history and examination, radiographs were ordered. As routine procedure the patient confirmed that there were no contraindications to taking radiographs, including but not limited to pregnancy, trying to become pregnant, receiving active radiation therapy, or other contraindication for Xray exposure. The rationale was due to need of structural integrity assessment.

- Views: The radiographs were performed in office in the standing (weight bearing) position with the following view(s): Cervical-AP/Lateral, Lumbar-AP, Lumbar-Lateral, Lumbar-L Lateral Flexion and Lumbar-R Lateral Flexion.

- Curve Analysis: cervical spine: curve severe decrease, mild dextroscoliosis and with anterior weight bearing.

- Curve Analysis: thoracic spine: curve moderate increase.

- Curve Analysis: lumbar spine: curve moderate decrease, mild levoscoliosis and with anterior weight bearing.

- Degenerative Joint Disease: moderate to severe C4, C5, C6, C7, L3, L4 and L5.

- Degenerative Disc Disease: moderate to severe C4, C5, C6, C7, L2, L3, L4 and L5.

- Otherwise: Structures demonstrate size, shape, & density WNL, Negative for recent fractures and Negative for gross osteopathology.

### Assessment:

## ASSESSMENT:

Cindy is of fair health and is expected to make fair progress and recovery with few residuals. She has duration of current episode longer than 1 month, obesity, older age, osteoarthritis, patient compliance, positive radiographic findings and waiting more than 7 days to seek treatment and no noted contraindications to chiropractic care. Based on her history and examination, it is reasonable to believe that her recovery may take

## Chart Notes

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

Patient: Blaine, Cindy

DOB: 05/26/1963

Ins Co

Pol #

Insured

Date 06/05/2017

Provider Dr. Jacob Young

\*\*\* continued from previous page \*\*\*

longer than an average patient with an uncomplicated case.

## DIAGNOSIS:

Upon consideration of the information available I have diagnosed Cindy Blaine with: (M54.42) Lumbago w/ sciatica, LT side, (M62.830) Muscle spasm of back, (M99.03) Seg and somatic dysf of lumbar reg, (M99.05) Seg and somatic dysf of pelvic reg, (M99.04) Seg and somatic dysf of sacral reg, (M25.552) Pain in LT hip, (M25.551) Pain in RT hip, (M79.671) Pain in right foot, (M99.06) Seg and somatic dysf of lower extremity, (M40.03) Postural kyphosis, cervicothoracic region, (M54.6) Pain in thoracic spine, (M99.02) Seg and somatic dysf of thoracic reg, (M54.2) Cervicalgia, (M99.01) Seg and somatic dysf of cervical reg

## Plan:

## TREATMENT PLAN:

Cindy's treatment plan for this episode began on 06/05/2017 and is projected to be completed by 08/28/2017.

- **Home/Self Care:** Cindy was instructed in home care recommendations that included: home cold pack issued today. She was instructed to ice for 20 minutes for pain, repeat after 60 minutes and discontinue after 3 hours

- **Chief Complaint:** right anterior pelvis/hip, left anterior pelvis/hip, right anterior thigh, right dorsal foot, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh

- **Functional Deficit:** Cindy reports employment has become difficult due to some or all of the following: bending over, concentrating, exercising, getting to sleep, performing household chores, lifting objects, looking over shoulder, reaching overhead, rising out of chair or bed, sitting, standing, staying asleep, using a computer and walking when she does this more than 3 minutes

- **Short Term Tx Goal:** To increase her ability to perform the above to 30 minutes by the re-exam date within 30 days unless improvement warrants discharge sooner.

- **Long Term Goal:** Attain pre-condition/pre-injury status

- **Primary Treatment:** Diversified, Drop Table and Manual- Chiropractic Manipulative Therapy (CMT) (approx: 36 visits) to the cervical dorsal spinal region, lumbar spinal region, lumbosacral spinal region, sacral spinal region, sacroiliac spinal region, thoraco-lumbar spinal region, thoracic spinal region, pelvic spinal region, left knee, left leg, right foot and right knee at a frequency and duration of 3 visits per week for next 12 weeks followed by a re-exam within 30 days.

- **Tx Effectiveness:** Overall effectiveness of treatment for this complaint will be evaluated by analyzing the Back Bournemouth Questionnaire functional outcome assessment tool. The beginning score or percentage was 74 disability and the goal score or percentage is 10% or better.

Revised Oswestry was 56 % disability.

Lower Extremity Assessment was 71% disability.

- **Traction: Y-Axis mechanical traction** applied to bilateral cervico-thoracic and lumbo-sacral to increase joint mobility during relief phase treatment. For 8 minutes 3 visits per week for next 12 weeks

- **Therapeutic Exercise-Patient consented: Manual stretching** therapeutic exercises performed to the bilateral muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 15 minutes for 2 reps - 2 sets to improve kinesthetic sense, to improve posture and to improve coordination during therapeutic phase treatment. For 15 minutes at a frequency and duration of 3 visits per week for next 12 weeks

- **Therapeutic Exercise: Whole body vibration** therapeutic exercises were performed to the bilateral

**Chart Notes**

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

<b>Patient:</b> Blaine, Cindy	<b>DOB:</b> 05/26/1963	
<b>Ins Co</b>	<b>Pol #</b>	<b>Insured</b>

**Date** 06/05/2017

**Provider** Dr. Jacob Young \*\*\* continued from previous page \*\*\*

muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the upper leg and muscle group of the lower leg region(s) for 5 minutes for 1 reps - 1 sets to improve kinesthetic sense, to improve posture, to improve coordination, to improve proprioception for sitting activities and to improve proprioception for standing activities during therapeutic phase treatment. For 5 minutes at frequency and duration of 3 visits per week for weeks 5-12

- **Therapeutic Exercise: Static weight** assisted Therapeutic Exercises performed to the bilateral muscle group of the upper to mid cervical, muscle group of the mid to lower cervical, muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 8 minutes with 3-6 lbs for 1 reps - 1 sets to improve kinesthetic sense, to improve posture, to improve coordination, to improve proprioception for sitting activities and to improve proprioception for standing activities during therapeutic phase treatment. For 8 minutes at a frequency and duration of 3 visits per week for weeks 5-12

- **Therapeutic Exercise: Resistance band** assisted therapeutic exercises performed to the bilateral muscle group of the upper to mid cervical, muscle group of the mid to lower cervical, muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 10 minutes with medium resistance band for 10-50 reps - 1 sets to improve kinesthetic sense, to improve posture and to improve coordination during therapeutic phase treatment. For 10 minutes at a frequency and duration of 3 visits per week for weeks 9-12

**Today's Treatment:**

- **Chief Complaint:** right anterior pelvis/hip, left anterior pelvis/hip, left anterior thigh, right dorsal foot, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh

- **Primary Treatment:** Diversified, Drop Table and Manual- Chiropractic Manipulative Therapy (CMT) to the C2, C6, T2, T6, T10, L1, L5, sacrum and left pelvis spinal level(s). -- -- --

- **Traction: Y-Axis mechanical traction** applied to cervico-thoracic and lumbo-sacral for 8 minutes. Exercise began at 3:55. Exercise completed at 4:03.

- **Therapeutic Exercise-Patient consented: Manual stretching** Therapeutic Exercises performed as detailed in the initial treatment plan for 15 minutes.

Exercise began at 4:03. Therapeutic wobble chair: 25 reps each of side to side, front to back, clockwise rotation, counterclockwise rotations. Cervical extension traction: 20 reps with 20 second hold on final rep-increase by 10 reps each week. Cervical/Lumbar extension traction stretch: 3 minutes. Beginner floor exercises: single knee to chest, both knees to chest, single knee to opposite shoulder, pelvic tilt, pelvic tilt with lift, cat/camel: each performed 2 times for 15-20 second hold. Precor stretchtrainer: lower back, upper back, shoulders, hips/gluteals: each performed 2 times for 15 seconds. Exercise completed at 4:18.

**- Advised**

- **Tx Effect:** Treatment rendered without incident and responding as expected.

- **Next Visit:** continue with treatment plan as scheduled

**Chart Notes**

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

---

<b>Patient:</b> Blaine, Cindy	<b>DOB:</b> 05/26/1963	
<b>Ins Co</b>	<b>Pol #</b>	<b>Insured</b>

---

**Date** 06/05/2017

**Provider** Dr. Jacob Young

**\*\*\* continued from previous page \*\*\***

**Diagnosis** M54.42: Lumbago w/ sciatica, LT side  
M62.830: Muscle spasm of back  
M99.03: Seg and somatic dysf of lumbar reg  
M99.05: Seg and somatic dysf of pelvic reg  
M99.04: Seg and somatic dysf of sacral reg  
M25.552: Pain in LT hip  
M25.551: Pain in RT hip  
M79.671: Pain in right foot  
M99.06: Seg and somatic dysf of lower extremity  
M40.03: Postural kyphosis, cervicothoracic region  
M54.6: Pain in thoracic spine  
M99.02: Seg and somatic dysf of thoracic reg  
M54.2: Cervicalgia  
M99.01: Seg and somatic dysf of cervical reg

Electronically Signed



Dr. Jacob Young 06/14/2017 11:38 AM

---

## Chart Notes

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

Patient: Blaine, Cindy

DOB: 05/26/1963

Ins Co

Pol #

Insured

Date 06/07/2017

Provider Dr. Jacob Young

### Subjective:

Cindy sought treatment today, complaining of continuous burning and shooting discomfort in the back of the left hip. She describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 8 and indicated that the discomfort occurs approximately 90% of the time. She states the discomfort is same since her last visit.

Cindy also complained of intermittent burning and throbbing discomfort in the low back. She describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 6 and indicated that the discomfort occurs approximately 70% of the time. She states the discomfort is same since her last visit.

Cindy also complained of intermittent sharp discomfort in the top of the right foot. She describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 7 and indicated that the discomfort occurs approximately 70% of the time. She states the discomfort is same since her last visit.

Cindy also complained of intermittent burning and throbbing discomfort in the front of the left hip. She describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 10 and indicated that the discomfort occurs approximately 90% of the time. She states the discomfort is same since her last visit.

### Objective:

#### Daily Objective Findings:

- *Spinal Restriction(s)/Subluxation(s)*: C2, C6, T2, T6, T10, L1, L5, sacrum and left pelvis
- *Extraspinal Restrictions/Subluxations*: -- -- -- .
- *Pain/Tenderness*: cervico-thoracic, upper thoracic, lower lumbar, lumbo-sacral, sacral, upper leg and foot
- *Postural Analysis*: short right leg (pelvic deficiency), head forward flexed, head rotation right, high right shoulder, thoracic hyperkyphosis and high left hip.
- *Muscle Spasm(s)*: moderate muscle spasms in the following areas; left anterior pelvis/hip, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh.
- *ROM Concern(s)*: entire lumbar spine and cervical extension was recorded as moderately reduced with pain noted.

### Assessment:

## Chart Notes

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

Patient: Blaine, Cindy

DOB: 05/26/1963

Ins Co

Pol #

Insured

Date 06/07/2017

Provider Dr. Jacob Young

\*\*\* continued from previous page \*\*\*

### ASSESSMENT:

Cindy is of fair health and is expected to make fair progress and recovery with few residuals. She has duration of current episode longer than 1 month, obesity, older age, osteoarthritis, patient compliance, positive radiographic findings and waiting more than 7 days to seek treatment and no noted contraindications to chiropractic care. Based on her history and examination, it is reasonable to believe that her recovery may take longer than an average patient with an uncomplicated case.

### DIAGNOSIS:

Upon consideration of the information available I have diagnosed Cindy Blaine with: (M54.42) Lumbago w/ sciatica, LT side, (M62.830) Muscle spasm of back, (M99.03) Seg and somatic dysf of lumbar reg, (M99.05) Seg and somatic dysf of pelvic reg, (M99.04) Seg and somatic dysf of sacral reg, (M25.552) Pain in LT hip, (M25.551) Pain in RT hip, (M79.671) Pain in right foot, (M99.06) Seg and somatic dysf of lower extremity, (M40.03) Postural kyphosis, cervicothoracic region, (M54.6) Pain in thoracic spine, (M99.02) Seg and somatic dysf of thoracic reg, (M54.2) Cervicalgia, (M99.01) Seg and somatic dysf of cervical reg

**Daily Assessment:** same and meeting expectations as indicated in today's subjective.

- *Current Status:* Has stayed the same because she is expected to respond to care shortly and is showing improved function.

### Plan:

### TREATMENT PLAN:

Cindy's treatment plan for this episode began on 06/05/2017 and is projected to be completed by 08/28/2017.

- *Home/Self Care:* Cindy was instructed in home care recommendations that included: home cold pack issued today. She was instructed to ice for 20 minutes for pain, repeat after 60 minutes and discontinue after 3 hours

- **Chief Complaint:** right anterior pelvis/hip, left anterior pelvis/hip, right anterior thigh, right dorsal foot, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh

- *Functional Deficit:* Cindy reports employment has become difficult due to some or all of the following: bending over, concentrating, exercising, getting to sleep, performing household chores, lifting objects, looking over shoulder, reaching overhead, rising out of chair or bed, sitting, standing, staying asleep, using a computer and walking when she does this more than 3 minutes

- *Short Term Tx Goal:* To increase her ability to perform the above to 30 minutes by the re-exam date within 30 days unless improvement warrants discharge sooner.

- *Long Term Goal:* Attain pre-condition/pre-injury status

- **Primary Treatment:** Diversified, Drop Table and Manual- Chiropractic Manipulative Therapy (CMT) (approx: 36 visits) to the cervical dorsal spinal region, lumbar spinal region, lumbosacral spinal region, sacral spinal region, sacroiliac spinal region, thoraco-lumbar spinal region, thoracic spinal region, pelvic spinal region, left knee, left leg, right foot and right knee at a frequency and duration of 3 visits per week for next 12 weeks followed by a re-exam within 30 days.

- *Tx Effectiveness:* Overall effectiveness of treatment for this complaint will be evaluated by analyzing the Back Bournemouth Questionnaire functional outcome assessment tool. The beginning score or percentage was 74 disability and the goal score or percentage is 10% or better.

Revised Oswestry was 56 % disability.

Lower Extremity Assessment was 71% disability.

## Chart Notes

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

<b>Patient:</b> Blaine, Cindy	<b>DOB:</b> 05/26/1963	
<b>Ins Co</b>	<b>Pol #</b>	<b>Insured</b>
<b>Date</b> 06/07/2017		
<b>Provider</b> Dr. Jacob Young		<b>*** continued from previous page ***</b>

- **Traction: Y-Axis mechanical traction** applied to bilateral cervico-thoracic and lumbo-sacral to increase joint mobility during relief phase treatment. For 8 minutes 3 visits per week for next 12 weeks

- **Therapeutic Exercise-Patient consented: Manual stretching** therapeutic exercises performed to the bilateral muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 15 minutes for 2 reps - 2 sets to improve kinesthetic sense, to improve posture and to improve coordination during therapeutic phase treatment. For 15 minutes at a frequency and duration of 3 visits per week for next 12 weeks

- **Therapeutic Exercise: Whole body vibration** therapeutic exercises were performed to the bilateral muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the upper leg and muscle group of the lower leg region(s) for 5 minutes for 1 reps - 1 sets to improve kinesthetic sense, to improve posture, to improve coordination, to improve proprioception for sitting activities and to improve proprioception for standing activities during therapeutic phase treatment. For 5 minutes at frequency and duration of 3 visits per week for weeks 5-12

- **Therapeutic Exercise: Static weight** assisted Therapeutic Exercises performed to the bilateral muscle group of the upper to mid cervical, muscle group of the mid to lower cervical, muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 8 minutes with 3-6 lbs for 1 reps - 1 sets to improve kinesthetic sense, to improve posture, to improve coordination, to improve proprioception for sitting activities and to improve proprioception for standing activities during therapeutic phase treatment. For 8 minutes at a frequency and duration of 3 visits per week for weeks 5-12

- **Therapeutic Exercise: Resistance band** assisted therapeutic exercises performed to the bilateral muscle group of the upper to mid cervical, muscle group of the mid to lower cervical, muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 10 minutes with medium resistance band for 10-50 reps - 1 sets to improve kinesthetic sense, to improve posture and to improve coordination during therapeutic phase treatment. For 10 minutes at a frequency and duration of 3 visits per week for weeks 9-12

### Today's Treatment:

- **Chief Complaint:** right anterior pelvis/hip, left anterior pelvis/hip, left anterior thigh, right dorsal foot, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh

- **Primary Treatment:** Diversified, Drop Table and Manual- Chiropractic Manipulative Therapy (CMT) to the C2, C6, T2, T6, T10, L1, L5, sacrum and left pelvis spinal level(s). -- --

- **Traction: Y-Axis mechanical traction** applied to cervico-thoracic and lumbo-sacral for 8 minutes. Exercise began at 4:55. Exercise completed at 5:03.

- **Therapeutic Exercise-Patient consented: Manual stretching** Therapeutic Exercises performed as detailed in the initial treatment plan for 15 minutes.

Exercise began at 5:03. Therapeutic wobble chair: 25 reps each of side to side, front to back, clockwise rotation, counterclockwise rotations. Cervical extension traction: 20 reps with 20 second hold on final rep-increase by 10 reps each week. Cervical/Lumbar extension traction stretch: 3 minutes. Beginner floor exercises: single knee to chest, both knees to chest, single knee to opposite shoulder, pelvic tilt, pelvic tilt with lift, cat/camel: each performed 2 times for 15-20 second hold. Precor stretchtrainer: lower back, upper back, shoulders, hips/gluteals: each performed 2 times for 15 seconds. Exercise completed at 5:18.

**Chart Notes**

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

---

<b>Patient:</b> Blaine, Cindy	<b>DOB:</b> 05/26/1963	
<b>Ins Co</b>	<b>Pol #</b>	<b>Insured</b>

---

**Date** 06/07/2017

**Provider** Dr. Jacob Young \*\*\* continued from previous page \*\*\*

**- Advised**

- *Tx Effect:* Treatment rendered without incident and responding as expected.
- *Next Visit:* continue with treatment plan as scheduled

**Diagnosis** M54.42: Lumbago w/ sciatica, LT side  
M62.830: Muscle spasm of back  
M99.03: Seg and somatic dysf of lumbar reg  
M99.05: Seg and somatic dysf of pelvic reg  
M99.04: Seg and somatic dysf of sacral reg  
M25.552: Pain in LT hip  
M25.551: Pain in RT hip  
M79.671: Pain in right foot  
M99.06: Seg and somatic dysf of lower extremity  
M40.03: Postural kyphosis, cervicothoracic region  
M54.6: Pain in thoracic spine  
M99.02: Seg and somatic dysf of thoracic reg  
M54.2: Cervicalgia  
M99.01: Seg and somatic dysf of cervical reg

Electronically Signed



Dr. Jacob Young 06/14/2017 11:45 AM

---

## Chart Notes

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

Patient: Blaine, Cindy

DOB: 05/26/1963

Ins Co

Pol #

Insured

Date 06/09/2017

Provider Dr. Jacob Young

### Subjective:

Cindy sought treatment today, complaining of continuous aching and tightness discomfort in the low back. She describes that the discomfort decreases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 7 and indicated that the discomfort occurs approximately 70% of the time. She states the discomfort is worse since her last visit.

Cindy also complained of continuous burning and throbbing discomfort in the back of the left hip. She describes that the discomfort same with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 8 and indicated that the discomfort occurs approximately 90% of the time. She states the discomfort is same since her last visit.

Cindy also complained of continuous sharp, aching and throbbing discomfort in the top of the left foot. She describes that the discomfort same with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 7 and indicated that the discomfort occurs approximately 70% of the time. She states the discomfort is same since her last visit.

### Objective:

#### Daily Objective Findings:

- *Spinal Restriction(s)/Subluxation(s)*: C2, C6, T2, T6, T10, L1, L5, sacrum and left pelvis
- *Extraspinal Restrictions/Subluxations*: - - - - .
- *Pain/Tenderness*: cervico-thoracic, upper thoracic, lower lumbar, lumbo-sacral, sacral, upper leg and foot
- *Postural Analysis*: short right leg (pelvic deficiency), head forward flexed, head rotation right, high right shoulder, thoracic hyperkyphosis and high left hip.
- *Muscle Spasm(s)*: moderate muscle spasms in the following areas; left anterior pelvis/hip, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh.
- *ROM Concern(s)*: entire lumbar spine and cervical extension was recorded as moderately reduced with pain noted.

### Assessment:

#### ASSESSMENT:

Cindy is of fair health and is expected to make fair progress and recovery with few residuals. She has duration of current episode longer than 1 month, obesity, older age, osteoarthritis, patient compliance, positive radiographic findings and waiting more than 7 days to seek treatment and no noted contraindications to chiropractic care. Based on her history and examination, it is reasonable to believe that her recovery may take longer than an average patient with an uncomplicated case.

## Chart Notes

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

Patient: Blaine, Cindy

DOB: 05/26/1963

Ins Co

Pol #

Insured

Date 06/09/2017

Provider Dr. Jacob Young

\*\*\* continued from previous page \*\*\*

### DIAGNOSIS:

Upon consideration of the information available I have diagnosed Cindy Blaine with: (M54.42) Lumbago w/ sciatica, LT side, (M62.830) Muscle spasm of back, (M99.03) Seg and somatic dysf of lumbar reg, (M99.05) Seg and somatic dysf of pelvic reg, (M99.04) Seg and somatic dysf of sacral reg, (M25.552) Pain in LT hip, (M25.551) Pain in RT hip, (M79.671) Pain in right foot, (M99.06) Seg and somatic dysf of lower extremity, (M40.03) Postural kyphosis, cervicothoracic region, (M54.6) Pain in thoracic spine, (M99.02) Seg and somatic dysf of thoracic reg, (M54.2) Cervicalgia, (M99.01) Seg and somatic dysf of cervical reg

**Daily Assessment:** same and meeting expectations as indicated in today's subjective.

- *Current Status:* Has stayed the same because she is expected to respond to care shortly and is showing improved function.

### Plan:

### TREATMENT PLAN:

Cindy's treatment plan for this episode began on 06/05/2017 and is projected to be completed by 08/28/2017.

- *Home/Self Care:* Cindy was instructed in home care recommendations that included: home cold pack issued today. She was instructed to ice for 20 minutes for pain, repeat after 60 minutes and discontinue after 3 hours

- **Chief Complaint:** right anterior pelvis/hip, left anterior pelvis/hip, right anterior thigh, right dorsal foot, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh

- *Functional Deficit:* Cindy reports employment has become difficult due to some or all of the following: bending over, concentrating, exercising, getting to sleep, performing household chores, lifting objects, looking over shoulder, reaching overhead, rising out of chair or bed, sitting, standing, staying asleep, using a computer and walking when she does this more than 3 minutes

- *Short Term Tx Goal:* To increase her ability to perform the above to 30 minutes by the re-exam date within 30 days unless improvement warrants discharge sooner.

- *Long Term Goal:* Attain pre-condition/pre-injury status

- **Primary Treatment:** Diversified, Drop Table and Manual- Chiropractic Manipulative Therapy (CMT) (approx: 36 visits) to the cervical dorsal spinal region, lumbar spinal region, lumbosacral spinal region, sacral spinal region, sacroiliac spinal region, thoraco-lumbar spinal region, thoracic spinal region, pelvic spinal region, left knee, left leg, right foot and right knee at a frequency and duration of 3 visits per week for next 12 weeks followed by a re-exam within 30 days.

- *Tx Effectiveness:* Overall effectiveness of treatment for this complaint will be evaluated by analyzing the Back Bournemouth Questionnaire functional outcome assessment tool. The beginning score or percentage was 74 disability and the goal score or percentage is 10% or better.

Revised Oswestry was 56 % disability.

Lower Extremity Assessment was 71% disability.

- **Traction: Y-Axis mechanical traction** applied to bilateral cervico-thoracic and lumbo-sacral to increase joint mobility during relief phase treatment. For 8 minutes 3 visits per week for next 12 weeks

- **Therapeutic Exercise-Patient consented: Manual stretching** therapeutic exercises performed to the bilateral muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 15 minutes for 2 reps - 2 sets to improve kinesthetic sense, to improve posture and to improve coordination during therapeutic phase treatment. For 15 minutes at a frequency and duration of 3 visits per week for next 12

**Chart Notes**

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

<b>Patient:</b> Blaine, Cindy	<b>DOB:</b> 05/26/1963	
<b>Ins Co</b>	<b>Pol #</b>	<b>Insured</b>

**Date** 06/09/2017

**Provider** Dr. Jacob Young \*\*\* continued from previous page \*\*\*

weeks

- **Therapeutic Exercise: Whole body vibration** therapeutic exercises were performed to the bilateral muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the upper leg and muscle group of the lower leg region(s) for 5 minutes for 1 reps - 1 sets to improve kinesthetic sense, to improve posture, to improve coordination, to improve proprioception for sitting activities and to improve proprioception for standing activities during therapeutic phase treatment. For 5 minutes at frequency and duration of 3 visits per week for weeks 5-12

- **Therapeutic Exercise: Static weight** assisted Therapeutic Exercises performed to the bilateral muscle group of the upper to mid cervical, muscle group of the mid to lower cervical, muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 8 minutes with 3-6 lbs for 1 reps - 1 sets to improve kinesthetic sense, to improve posture, to improve coordination, to improve proprioception for sitting activities and to improve proprioception for standing activities during therapeutic phase treatment. For 8 minutes at a frequency and duration of 3 visits per week for weeks 5-12

- **Therapeutic Exercise: Resistance band** assisted therapeutic exercises performed to the bilateral muscle group of the upper to mid cervical, muscle group of the mid to lower cervical, muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 10 minutes with medium resistance band for 10-50 reps - 1 sets to improve kinesthetic sense, to improve posture and to improve coordination during therapeutic phase treatment. For 10 minutes at a frequency and duration of 3 visits per week for weeks 9-12

**Today's Treatment:**

- **Chief Complaint:** right anterior pelvis/hip, left anterior pelvis/hip, left anterior thigh, right dorsal foot, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh

- **Primary Treatment:** Diversified, Drop Table and Manual- Chiropractic Manipulative Therapy (CMT) to the C2, C6, T2, T6, T10, L1, L5, sacrum and left pelvis spinal level(s). -- -- --

- **Traction: Y-Axis mechanical traction** applied to cervico-thoracic and lumbo-sacral for 8 minutes. Exercise began at 12:55. Exercise completed at 1:03.

- **Therapeutic Exercise-Patient consented: Manual stretching** Therapeutic Exercises performed as detailed in the initial treatment plan for 15 minutes.

Exercise began at 1:03. Therapeutic wobble chair: 25 reps each of side to side, front to back, clockwise rotation, counterclockwise rotations. Cervical extension traction: 20 reps with 20 second hold on final rep-increase by 10 reps each week. Cervical/Lumbar extension traction stretch: 3 minutes. Beginner floor exercises: single knee to chest, both knees to chest, single knee to opposite shoulder, pelvic tilt, pelvic tilt with lift, cat/camel: each performed 2 times for 15-20 second hold. Precor stretchtrainer: lower back, upper back, shoulders, hips/gluteals: each performed 2 times for 15 seconds. Exercise completed at 1:18.

**- Advised**

- **Tx Effect:** Treatment rendered without incident and responding as expected.

- **Next Visit:** continue with treatment plan as scheduled

**Chart Notes**

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

---

<b>Patient:</b> Blaine, Cindy	<b>DOB:</b> 05/26/1963	
<b>Ins Co</b>	<b>Pol #</b>	<b>Insured</b>

---

**Date** 06/09/2017

**Provider** Dr. Jacob Young

**\*\*\* continued from previous page \*\*\***

**Diagnosis** M54.42: Lumbago w/ sciatica, LT side  
M62.830: Muscle spasm of back  
M99.03: Seg and somatic dysf of lumbar reg  
M99.05: Seg and somatic dysf of pelvic reg  
M99.04: Seg and somatic dysf of sacral reg  
M25.552: Pain in LT hip  
M25.551: Pain in RT hip  
M79.671: Pain in right foot  
M99.06: Seg and somatic dysf of lower extremity  
M40.03: Postural kyphosis, cervicothoracic region  
M54.6: Pain in thoracic spine  
M99.02: Seg and somatic dysf of thoracic reg  
M54.2: Cervicalgia  
M99.01: Seg and somatic dysf of cervical reg

Electronically Signed



Dr. Jacob Young 06/14/2017 11:49 AM

---

## Chart Notes

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

Patient: Blaine, Cindy

DOB: 05/26/1963

Ins Co

Pol #

Insured

Date 06/14/2017

Provider Dr. Jacob Young

### Subjective:

Cindy sought treatment today, complaining of continuous burning and throbbing discomfort in the back of the left hip. She describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 9 and indicated that the discomfort occurs approximately 90% of the time. She states the discomfort is same since her last visit.

Cindy also complained of frequent aching and tightness discomfort in the low back. She describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 7 and indicated that the discomfort occurs approximately 70% of the time. She states the discomfort is same since her last visit.

Cindy also complained of continuous sharp, shooting and throbbing discomfort in the top of the left foot. She describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 10 and indicated that the discomfort occurs approximately 100% of the time. She states the discomfort is worse since her last visit.

### Objective:

#### Daily Objective Findings:

- *Spinal Restriction(s)/Subluxation(s)*: C2, C6, T2, T6, T10, L1, L5, sacrum and left pelvis
- *Extraspinal Restrictions/Subluxations*: - - - - .
- *Pain/Tenderness*: cervico-thoracic, upper thoracic, lower lumbar, lumbo-sacral, sacral, upper leg and foot
- *Postural Analysis*: short right leg (pelvic deficiency), head forward flexed, head rotation right, high right shoulder, thoracic hyperkyphosis and high left hip.
- *Muscle Spasm(s)*: moderate muscle spasms in the following areas; left anterior pelvis/hip, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh.
- *ROM Concern(s)*: entire lumbar spine and cervical extension was recorded as moderately reduced with pain noted.

### Assessment:

#### ASSESSMENT:

Cindy is of fair health and is expected to make fair progress and recovery with few residuals. She has duration of current episode longer than 1 month, obesity, older age, osteoarthritis, patient compliance, positive radiographic findings and waiting more than 7 days to seek treatment and no noted contraindications to chiropractic care. Based on her history and examination, it is reasonable to believe that her recovery may take longer than an average patient with an uncomplicated case.

## Chart Notes

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

Patient: Blaine, Cindy

DOB: 05/26/1963

Ins Co

Pol #

Insured

Date 06/14/2017

Provider Dr. Jacob Young

\*\*\* continued from previous page \*\*\*

### DIAGNOSIS:

Upon consideration of the information available I have diagnosed Cindy Blaine with: (M54.42) Lumbago w/ sciatica, LT side, (M62.830) Muscle spasm of back, (M99.03) Seg and somatic dysf of lumbar reg, (M99.05) Seg and somatic dysf of pelvic reg, (M99.04) Seg and somatic dysf of sacral reg, (M25.552) Pain in LT hip, (M25.551) Pain in RT hip, (M79.671) Pain in right foot, (M99.06) Seg and somatic dysf of lower extremity, (M40.03) Postural kyphosis, cervicothoracic region, (M54.6) Pain in thoracic spine, (M99.02) Seg and somatic dysf of thoracic reg, (M54.2) Cervicalgia, (M99.01) Seg and somatic dysf of cervical reg

**Daily Assessment:** same and meeting expectations as indicated in today's subjective.

- *Current Status:* Has stayed the same because she is expected to respond to care shortly and is showing improved function.

### Plan:

### TREATMENT PLAN:

Cindy's treatment plan for this episode began on 06/05/2017 and is projected to be completed by 08/28/2017.

- *Home/Self Care:* Cindy was instructed in home care recommendations that included: home cold pack issued today. She was instructed to ice for 20 minutes for pain, repeat after 60 minutes and discontinue after 3 hours

- **Chief Complaint:** right anterior pelvis/hip, left anterior pelvis/hip, right anterior thigh, right dorsal foot, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh

- *Functional Deficit:* Cindy reports employment has become difficult due to some or all of the following: bending over, concentrating, exercising, getting to sleep, performing household chores, lifting objects, looking over shoulder, reaching overhead, rising out of chair or bed, sitting, standing, staying asleep, using a computer and walking when she does this more than 3 minutes

- *Short Term Tx Goal:* To increase her ability to perform the above to 30 minutes by the re-exam date within 30 days unless improvement warrants discharge sooner.

- *Long Term Goal:* Attain pre-condition/pre-injury status

- **Primary Treatment:** Diversified, Drop Table and Manual- Chiropractic Manipulative Therapy (CMT) (approx: 36 visits) to the cervical dorsal spinal region, lumbar spinal region, lumbosacral spinal region, sacral spinal region, sacroiliac spinal region, thoraco-lumbar spinal region, thoracic spinal region, pelvic spinal region, left knee, left leg, right foot and right knee at a frequency and duration of 3 visits per week for next 12 weeks followed by a re-exam within 30 days.

- *Tx Effectiveness:* Overall effectiveness of treatment for this complaint will be evaluated by analyzing the Back Bournemouth Questionnaire functional outcome assessment tool. The beginning score or percentage was 74 disability and the goal score or percentage is 10% or better.

Revised Oswestry was 56 % disability.

Lower Extremity Assessment was 71% disability.

- **Traction: Y-Axis mechanical traction** applied to bilateral cervico-thoracic and lumbo-sacral to increase joint mobility during relief phase treatment. For 8 minutes 3 visits per week for next 12 weeks

- **Therapeutic Exercise-Patient consented: Manual stretching** therapeutic exercises performed to the bilateral muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 15 minutes for 2 reps - 2 sets to improve kinesthetic sense, to improve posture and to improve coordination during therapeutic phase treatment. For 15 minutes at a frequency and duration of 3 visits per week for next 12

**Chart Notes**

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

<b>Patient:</b> Blaine, Cindy	<b>DOB:</b> 05/26/1963	
<b>Ins Co</b>	<b>Pol #</b>	<b>Insured</b>

**Date** 06/14/2017

**Provider** Dr. Jacob Young \*\*\* continued from previous page \*\*\*

weeks

- **Therapeutic Exercise: Whole body vibration** therapeutic exercises were performed to the bilateral muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the upper leg and muscle group of the lower leg region(s) for 5 minutes for 1 reps - 1 sets to improve kinesthetic sense, to improve posture, to improve coordination, to improve proprioception for sitting activities and to improve proprioception for standing activities during therapeutic phase treatment. For 5 minutes at frequency and duration of 3 visits per week for weeks 5-12

- **Therapeutic Exercise: Static weight** assisted Therapeutic Exercises performed to the bilateral muscle group of the upper to mid cervical, muscle group of the mid to lower cervical, muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 8 minutes with 3-6 lbs for 1 reps - 1 sets to improve kinesthetic sense, to improve posture, to improve coordination, to improve proprioception for sitting activities and to improve proprioception for standing activities during therapeutic phase treatment. For 8 minutes at a frequency and duration of 3 visits per week for weeks 5-12

- **Therapeutic Exercise: Resistance band** assisted therapeutic exercises performed to the bilateral muscle group of the upper to mid cervical, muscle group of the mid to lower cervical, muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 10 minutes with medium resistance band for 10-50 reps - 1 sets to improve kinesthetic sense, to improve posture and to improve coordination during therapeutic phase treatment. For 10 minutes at a frequency and duration of 3 visits per week for weeks 9-12

**Today's Treatment:**

- **Chief Complaint:** right anterior pelvis/hip, left anterior pelvis/hip, left anterior thigh, right dorsal foot, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh

- **Primary Treatment:** Diversified, Drop Table and Manual- Chiropractic Manipulative Therapy (CMT) to the C2, C6, T2, T6, T10, L1, L5, sacrum and left pelvis spinal level(s). -- -- --

- **Traction: Y-Axis mechanical traction** applied to cervico-thoracic and lumbo-sacral for 8 minutes. Exercise began at 5:17. Exercise completed at 5:25.

- **Therapeutic Exercise-Patient consented: Manual stretching** Therapeutic Exercises performed as detailed in the initial treatment plan for 15 minutes.

Exercise began at 5:25. Therapeutic wobble chair: 25 reps each of side to side, front to back, clockwise rotation, counterclockwise rotations. Cervical extension traction: 20 reps with 20 second hold on final rep-increase by 10 reps each week. Cervical/Lumbar extension traction stretch: 3 minutes. Beginner floor exercises: single knee to chest, both knees to chest, single knee to opposite shoulder, pelvic tilt, pelvic tilt with lift, cat/camel: each performed 2 times for 15-20 second hold. Precor stretchtrainer: lower back, upper back, shoulders, hips/gluteals: each performed 2 times for 15 seconds. Exercise completed at 5:40.

**- Advised**

- *Tx Effect:* Treatment rendered without incident and responding as expected.

- *Next Visit:* continue with treatment plan as scheduled

**Chart Notes**

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

---

<b>Patient:</b> Blaine, Cindy	<b>DOB:</b> 05/26/1963	
<b>Ins Co</b>	<b>Pol #</b>	<b>Insured</b>

---

**Date** 06/14/2017

**Provider** Dr. Jacob Young

**\*\*\* continued from previous page \*\*\***

**Diagnosis** M54.42: Lumbago w/ sciatica, LT side  
M62.830: Muscle spasm of back  
M99.03: Seg and somatic dysf of lumbar reg  
M99.05: Seg and somatic dysf of pelvic reg  
M99.04: Seg and somatic dysf of sacral reg  
M25.552: Pain in LT hip  
M25.551: Pain in RT hip  
M79.671: Pain in right foot  
M99.06: Seg and somatic dysf of lower extremity  
M40.03: Postural kyphosis, cervicothoracic region  
M54.6: Pain in thoracic spine  
M99.02: Seg and somatic dysf of thoracic reg  
M54.2: Cervicalgia  
M99.01: Seg and somatic dysf of cervical reg

Electronically Signed



Dr. Jacob Young 07/14/2017 08:00 AM

---

## Chart Notes

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

---

Patient: Blaine, Cindy

DOB: 05/26/1963

Ins Co

Pol #

Insured

---

Date 06/15/2017

Provider Dr. Jacob Young

---

### Subjective:

Cindy sought treatment today, complaining of continuous burning and shooting discomfort in the back of the left hip. She describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 10 and indicated that the discomfort occurs approximately 100% of the time. She states the discomfort is worse since her last visit.

Cindy also complained of frequent aching discomfort in the low back. She describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 7 and indicated that the discomfort occurs approximately 70% of the time. She states the discomfort is same since her last visit.

Cindy also complained of continuous sharp, aching, burning and throbbing discomfort in the top of the left foot. She describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 10 and indicated that the discomfort occurs approximately 100% of the time. She states the discomfort is same since her last visit.

### Objective:

#### Daily Objective Findings:

- *Spinal Restriction(s)/Subluxation(s)*: C1, C6, T2, T5, T10, L2, L5, sacrum and left pelvis
- *Extraspinal Restrictions/Subluxations*: -- -- -- .
- *Pain/Tenderness*: cervico-thoracic, upper thoracic, lower lumbar, lumbo-sacral, sacral, upper leg and foot
- *Postural Analysis*: short right leg (pelvic deficiency), head forward flexed, head rotation right, high right shoulder, thoracic hyperkyphosis and high left hip.
- *Muscle Spasm(s)*: moderate muscle spasms in the following areas; left anterior pelvis/hip, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh.
- *ROM Concern(s)*: entire lumbar spine and cervical extension was recorded as moderately reduced with pain noted.

### Assessment:

#### ASSESSMENT:

Cindy is of fair health and is expected to make fair progress and recovery with few residuals. She has duration of current episode longer than 1 month, obesity, older age, osteoarthritis, patient compliance, positive radiographic findings and waiting more than 7 days to seek treatment and no noted contraindications to chiropractic care. Based on her history and examination, it is reasonable to believe that her recovery may take longer than an average patient with an uncomplicated case.

### DIAGNOSIS:

## Chart Notes

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

Patient: Blaine, Cindy

DOB: 05/26/1963

Ins Co

Pol #

Insured

Date 06/15/2017

Provider Dr. Jacob Young

\*\*\* continued from previous page \*\*\*

Upon consideration of the information available I have diagnosed Cindy Blaine with: (M54.42) Lumbago w/ sciatica, LT side, (M62.830) Muscle spasm of back, (M99.03) Seg and somatic dysf of lumbar reg, (M99.05) Seg and somatic dysf of pelvic reg, (M99.04) Seg and somatic dysf of sacral reg, (M25.552) Pain in LT hip, (M25.551) Pain in RT hip, (M79.671) Pain in right foot, (M99.06) Seg and somatic dysf of lower extremity, (M40.03) Postural kyphosis, cervicothoracic region, (M54.6) Pain in thoracic spine, (M99.02) Seg and somatic dysf of thoracic reg, (M54.2) Cervicalgia, (M99.01) Seg and somatic dysf of cervical reg

**Daily Assessment:** same and meeting expectations as indicated in today's subjective.

- *Current Status:* Has stayed the same because she is expected to respond to care shortly and is showing improved function.

**Plan:**

### TREATMENT PLAN:

Cindy's treatment plan for this episode began on 06/05/2017 and is projected to be completed by 08/28/2017.

- *Home/Self Care:* Cindy was instructed in home care recommendations that included: home cold pack issued today. She was instructed to ice for 20 minutes for pain, repeat after 60 minutes and discontinue after 3 hours

- **Chief Complaint:** right anterior pelvis/hip, left anterior pelvis/hip, right anterior thigh, right dorsal foot, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh

- *Functional Deficit:* Cindy reports employment has become difficult due to some or all of the following: bending over, concentrating, exercising, getting to sleep, performing household chores, lifting objects, looking over shoulder, reaching overhead, rising out of chair or bed, sitting, standing, staying asleep, using a computer and walking when she does this more than 3 minutes

- *Short Term Tx Goal:* To increase her ability to perform the above to 30 minutes by the re-exam date within 30 days unless improvement warrants discharge sooner.

- *Long Term Goal:* Attain pre-condition/pre-injury status

- **Primary Treatment:** Diversified, Drop Table and Manual- Chiropractic Manipulative Therapy (CMT) (approx: 36 visits) to the cervical dorsal spinal region, lumbar spinal region, lumbosacral spinal region, sacral spinal region, sacroiliac spinal region, thoraco-lumbar spinal region, thoracic spinal region, pelvic spinal region, left knee, left leg, right foot and right knee at a frequency and duration of 3 visits per week for next 12 weeks followed by a re-exam within 30 days.

- *Tx Effectiveness:* Overall effectiveness of treatment for this complaint will be evaluated by analyzing the Back Bournemouth Questionnaire functional outcome assessment tool. The beginning score or percentage was 74 disability and the goal score or percentage is 10% or better.

Revised Oswestry was 56 % disability.

Lower Extremity Assessment was 71% disability.

- **Traction: Y-Axis mechanical traction** applied to bilateral cervico-thoracic and lumbo-sacral to increase joint mobility during relief phase treatment. For 8 minutes 3 visits per week for next 12 weeks

- **Therapeutic Exercise-Patient consented: Manual stretching** therapeutic exercises performed to the bilateral muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 15 minutes for 2 reps - 2 sets to improve kinesthetic sense, to improve posture and to improve coordination during therapeutic phase treatment. For 15 minutes at a frequency and duration of 3 visits per week for next 12 weeks

## Chart Notes

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

Patient: Blaine, Cindy

DOB: 05/26/1963

Ins Co

Pol #

Insured

Date 06/15/2017

Provider Dr. Jacob Young

\*\*\* continued from previous page \*\*\*

- **Therapeutic Exercise: Whole body vibration** therapeutic exercises were performed to the bilateral muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the upper leg and muscle group of the lower leg region(s) for 5 minutes for 1 reps - 1 sets to improve kinesthetic sense, to improve posture, to improve coordination, to improve proprioception for sitting activities and to improve proprioception for standing activities during therapeutic phase treatment. For 5 minutes at frequency and duration of 3 visits per week for weeks 5-12

- **Therapeutic Exercise: Static weight** assisted Therapeutic Exercises performed to the bilateral muscle group of the upper to mid cervical, muscle group of the mid to lower cervical, muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 8 minutes with 3-6 lbs for 1 reps - 1 sets to improve kinesthetic sense, to improve posture, to improve coordination, to improve proprioception for sitting activities and to improve proprioception for standing activities during therapeutic phase treatment. For 8 minutes at a frequency and duration of 3 visits per week for weeks 5-12

- **Therapeutic Exercise: Resistance band** assisted therapeutic exercises performed to the bilateral muscle group of the upper to mid cervical, muscle group of the mid to lower cervical, muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 10 minutes with medium resistance band for 10-50 reps - 1 sets to improve kinesthetic sense, to improve posture and to improve coordination during therapeutic phase treatment. For 10 minutes at a frequency and duration of 3 visits per week for weeks 9-12

### Today's Treatment:

- **Chief Complaint:** right anterior pelvis/hip, left anterior pelvis/hip, left anterior thigh, right dorsal foot, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh

- **Primary Treatment:** Diversified, Drop Table and Manual- Chiropractic Manipulative Therapy (CMT) to the C1, C6, T2, T5, T10, L2, L5, sacrum and left pelvis spinal level(s). -- -- --

- **Traction: Y-Axis mechanical traction** applied to cervico-thoracic and lumbo-sacral for 8 minutes. Exercise began at 5:02 Exercise completed at 5:10.

- **Therapeutic Exercise-Patient consented: Manual stretching** Therapeutic Exercises performed as detailed in the initial treatment plan for 15 minutes.

Exercise began at 5:10. Therapeutic wobble chair: 25 reps each of side to side, front to back, clockwise rotation, counterclockwise rotations. Cervical extension traction: 20 reps with 20 second hold on final rep-increase by 10 reps each week. Cervical/Lumbar extension traction stretch: 3 minutes. Beginner floor exercises: single knee to chest, both knees to chest, single knee to opposite shoulder, pelvic tilt, pelvic tilt with lift, cat/camel: each performed 2 times for 15-20 second hold. Precor stretchtrainer: lower back, upper back, shoulders, hips/gluteals: each performed 2 times for 15 seconds. Exercise completed at 5:25.

### - Advised

- **Tx Effect:** Treatment rendered without incident and responding as expected.

- **Next Visit:** continue with treatment plan as scheduled

**Chart Notes**

**Cindy Blaine**

**Black & Gold Chiropractic & Wellness**  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

---

<b>Patient:</b> Blaine, Cindy	<b>DOB:</b> 05/26/1963	
<b>Ins Co</b>	<b>Pol #</b>	<b>Insured</b>

---

**Date** 06/15/2017

**Provider** Dr. Jacob Young

**\*\*\* continued from previous page \*\*\***

**Diagnosis** M54.42: Lumbago w/ sciatica, LT side  
M62.830: Muscle spasm of back  
M99.03: Seg and somatic dysf of lumbar reg  
M99.05: Seg and somatic dysf of pelvic reg  
M99.04: Seg and somatic dysf of sacral reg  
M25.552: Pain in LT hip  
M25.551: Pain in RT hip  
M79.671: Pain in right foot  
M99.06: Seg and somatic dysf of lower extremity  
M40.03: Postural kyphosis, cervicothoracic region  
M54.6: Pain in thoracic spine  
M99.02: Seg and somatic dysf of thoracic reg  
M54.2: Cervicalgia  
M99.01: Seg and somatic dysf of cervical reg

Electronically Signed



Dr. Jacob Young 07/14/2017 08:03 AM

---

## Chart Notes

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

---

Patient: Blaine, Cindy

DOB: 05/26/1963

Ins Co

Pol #

Insured

---

Date 06/19/2017

Provider Dr. Jacob Young

---

### Subjective:

Cindy sought treatment today, complaining of continuous burning and throbbing discomfort in the back of the left hip. She describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 10 and indicated that the discomfort occurs approximately 100% of the time. She states the discomfort is worse since her last visit.

Cindy also complained of intermittent burning and tightness discomfort in the low back. She describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 7 and indicated that the discomfort occurs approximately 80% of the time. She states the discomfort is same since her last visit.

Cindy also complained of continuous sharp discomfort in the top of the left foot. She describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 10 and indicated that the discomfort occurs approximately 100% of the time. She states the discomfort is worse since her last visit.

### Objective:

#### Daily Objective Findings:

- *Spinal Restriction(s)/Subluxation(s)*: C2, C6, T2, T6, T10, L1, L5, sacrum and left pelvis
- *Extraspinal Restrictions/Subluxations*: - - - - .
- *Pain/Tenderness*: cervico-thoracic, upper thoracic, lower lumbar, lumbo-sacral, sacral, upper leg and foot
- *Postural Analysis*: short right leg (pelvic deficiency), head forward flexed, head rotation right, high right shoulder, thoracic hyperkyphosis and high left hip.
- *Muscle Spasm(s)*: moderate muscle spasms in the following areas; left anterior pelvis/hip, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh.
- *ROM Concern(s)*: entire lumbar spine and cervical extension was recorded as moderately reduced with pain noted.

### Assessment:

#### ASSESSMENT:

Cindy is of fair health and is expected to make fair progress and recovery with few residuals. She has duration of current episode longer than 1 month, obesity, older age, osteoarthritis, patient compliance, positive radiographic findings and waiting more than 7 days to seek treatment and no noted contraindications to chiropractic care. Based on her history and examination, it is reasonable to believe that her recovery may take longer than an average patient with an uncomplicated case.

## Chart Notes

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

Patient: Blaine, Cindy

DOB: 05/26/1963

Ins Co

Pol #

Insured

Date 06/19/2017

Provider Dr. Jacob Young

\*\*\* continued from previous page \*\*\*

### DIAGNOSIS:

Upon consideration of the information available I have diagnosed Cindy Blaine with: (M54.42) Lumbago w/ sciatica, LT side, (M62.830) Muscle spasm of back, (M99.03) Seg and somatic dysf of lumbar reg, (M99.05) Seg and somatic dysf of pelvic reg, (M99.04) Seg and somatic dysf of sacral reg, (M25.552) Pain in LT hip, (M25.551) Pain in RT hip, (M79.671) Pain in right foot, (M99.06) Seg and somatic dysf of lower extremity, (M40.03) Postural kyphosis, cervicothoracic region, (M54.6) Pain in thoracic spine, (M99.02) Seg and somatic dysf of thoracic reg, (M54.2) Cervicalgia, (M99.01) Seg and somatic dysf of cervical reg

**Daily Assessment:** same and meeting expectations as indicated in today's subjective.

- *Current Status:* Has stayed the same and she is expected to demonstrate improved function with continued care.

### Plan:

### TREATMENT PLAN:

Cindy's treatment plan for this episode began on 06/05/2017 and is projected to be completed by 08/28/2017.

- *Home/Self Care:* Cindy was instructed in home care recommendations that included: home cold pack issued today. She was instructed to ice for 20 minutes for pain, repeat after 60 minutes and discontinue after 3 hours

- **Chief Complaint:** right anterior pelvis/hip, left anterior pelvis/hip, right anterior thigh, right dorsal foot, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh

- *Functional Deficit:* Cindy reports employment has become difficult due to some or all of the following: bending over, concentrating, exercising, getting to sleep, performing household chores, lifting objects, looking over shoulder, reaching overhead, rising out of chair or bed, sitting, standing, staying asleep, using a computer and walking when she does this more than 3 minutes

- *Short Term Tx Goal:* To increase her ability to perform the above to 30 minutes by the re-exam date within 30 days unless improvement warrants discharge sooner.

- *Long Term Goal:* Attain pre-condition/pre-injury status

- **Primary Treatment:** Diversified, Drop Table and Manual- Chiropractic Manipulative Therapy (CMT) (approx: 36 visits) to the cervical dorsal spinal region, lumbar spinal region, lumbosacral spinal region, sacral spinal region, sacroiliac spinal region, thoraco-lumbar spinal region, thoracic spinal region, pelvic spinal region, left knee, left leg, right foot and right knee at a frequency and duration of 3 visits per week for next 12 weeks followed by a re-exam within 30 days.

- *Tx Effectiveness:* Overall effectiveness of treatment for this complaint will be evaluated by analyzing the Back Bournemouth Questionnaire functional outcome assessment tool. The beginning score or percentage was 74 disability and the goal score or percentage is 10% or better.

Revised Oswestry was 56 % disability.

Lower Extremity Assessment was 71% disability.

- **Traction: Y-Axis mechanical traction** applied to bilateral cervico-thoracic and lumbo-sacral to increase joint mobility during relief phase treatment. For 8 minutes 3 visits per week for next 12 weeks

- **Therapeutic Exercise-Patient consented: Manual stretching** therapeutic exercises performed to the bilateral muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 15 minutes for 2 reps - 2 sets to improve kinesthetic sense, to improve posture and to improve coordination during therapeutic phase treatment. For 15 minutes at a frequency and duration of 3 visits per week for next 12

**Chart Notes**

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

<b>Patient:</b> Blaine, Cindy	<b>DOB:</b> 05/26/1963	
<b>Ins Co</b>	<b>Pol #</b>	<b>Insured</b>

**Date** 06/19/2017

**Provider** Dr. Jacob Young \*\*\* continued from previous page \*\*\*

weeks

- **Therapeutic Exercise: Whole body vibration** therapeutic exercises were performed to the bilateral muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the upper leg and muscle group of the lower leg region(s) for 5 minutes for 1 reps - 1 sets to improve kinesthetic sense, to improve posture, to improve coordination, to improve proprioception for sitting activities and to improve proprioception for standing activities during therapeutic phase treatment. For 5 minutes at frequency and duration of 3 visits per week for weeks 5-12

- **Therapeutic Exercise: Static weight** assisted Therapeutic Exercises performed to the bilateral muscle group of the upper to mid cervical, muscle group of the mid to lower cervical, muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 8 minutes with 3-6 lbs for 1 reps - 1 sets to improve kinesthetic sense, to improve posture, to improve coordination, to improve proprioception for sitting activities and to improve proprioception for standing activities during therapeutic phase treatment. For 8 minutes at a frequency and duration of 3 visits per week for weeks 5-12

- **Therapeutic Exercise: Resistance band** assisted therapeutic exercises performed to the bilateral muscle group of the upper to mid cervical, muscle group of the mid to lower cervical, muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 10 minutes with medium resistance band for 10-50 reps - 1 sets to improve kinesthetic sense, to improve posture and to improve coordination during therapeutic phase treatment. For 10 minutes at a frequency and duration of 3 visits per week for weeks 9-12

**Today's Treatment:**

- **Chief Complaint:** right anterior pelvis/hip, left anterior pelvis/hip, left anterior thigh, right dorsal foot, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh

- **Primary Treatment:** Diversified, Drop Table and Manual- Chiropractic Manipulative Therapy (CMT) to the C2, C6, T2, T6, T10, L1, L5, sacrum and left pelvis spinal level(s). -- -- --

- **Traction: Y-Axis mechanical traction** applied to cervico-thoracic and lumbo-sacral for 8 minutes. Exercise began at 9:15 Exercise completed at 9:23.

- **Therapeutic Exercise-Patient consented: Manual stretching** Therapeutic Exercises performed as detailed in the initial treatment plan for 15 minutes.

Exercise began at 9:23. Therapeutic wobble chair: 25 reps each of side to side, front to back, clockwise rotation, counterclockwise rotations. Cervical extension traction: 20 reps with 20 second hold on final rep-increase by 10 reps each week. Cervical/Lumbar extension traction stretch: 3 minutes. Beginner floor exercises: single knee to chest, both knees to chest, single knee to opposite shoulder, pelvic tilt, pelvic tilt with lift, cat/camel: each performed 2 times for 15-20 second hold. Precor stretchtrainer: lower back, upper back, shoulders, hips/gluteals: each performed 2 times for 15 seconds. Exercise completed at 9:38.

**- Advised**

- **Tx Effect:** Treatment rendered without incident and responding as expected.

- **Next Visit:** continue with treatment plan as scheduled

**Chart Notes**

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

---

<b>Patient:</b> Blaine, Cindy	<b>DOB:</b> 05/26/1963	
<b>Ins Co</b>	<b>Pol #</b>	<b>Insured</b>

---

**Date** 06/19/2017

**Provider** Dr. Jacob Young

**\*\*\* continued from previous page \*\*\***

**Diagnosis** M54.42: Lumbago w/ sciatica, LT side  
M62.830: Muscle spasm of back  
M99.03: Seg and somatic dysf of lumbar reg  
M99.05: Seg and somatic dysf of pelvic reg  
M99.04: Seg and somatic dysf of sacral reg  
M25.552: Pain in LT hip  
M25.551: Pain in RT hip  
M79.671: Pain in right foot  
M99.06: Seg and somatic dysf of lower extremity  
M40.03: Postural kyphosis, cervicothoracic region  
M54.6: Pain in thoracic spine  
M99.02: Seg and somatic dysf of thoracic reg  
M54.2: Cervicalgia  
M99.01: Seg and somatic dysf of cervical reg

Electronically Signed



Dr. Jacob Young 07/14/2017 08:08 AM

---

## Chart Notes

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

Patient: Blaine, Cindy

DOB: 05/26/1963

Ins Co

Pol #

Insured

Date 06/21/2017

Provider Dr. Jacob Young

### Subjective:

Cindy sought treatment today, complaining of continuous sharp, burning and throbbing discomfort in the back of the left hip. She describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 10 and indicated that the discomfort occurs approximately 90% of the time. She states the discomfort is worse since her last visit.

Cindy also complained of intermittent tightness discomfort in the low back. She describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 5 and indicated that the discomfort occurs approximately 70% of the time. She states the discomfort is same since her last visit.

Cindy also complained of continuous aching, burning and throbbing discomfort in the left hamstring. She describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 9 and indicated that the discomfort occurs approximately 90% of the time. She states the discomfort is worse since her last visit.

Cindy also complained of intermittent sharp, shooting and throbbing discomfort in the top of the right foot. She describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 7 and indicated that the discomfort occurs approximately 70% of the time. She states the discomfort is same since her last visit.

### Objective:

#### Daily Objective Findings:

- *Spinal Restriction(s)/Subluxation(s)*: C1, C6, T2, T6, T11, L1, L5, sacrum and left pelvis
- *Extraspinal Restrictions/Subluxations*: - - - - .
- *Pain/Tenderness*: cervico-thoracic, upper thoracic, lower lumbar, lumbo-sacral, sacral, upper leg and foot
- *Postural Analysis*: short right leg (pelvic deficiency), head forward flexed, head rotation right, high right shoulder, thoracic hyperkyphosis and high left hip.
- *Muscle Spasm(s)*: moderate muscle spasms in the following areas; left anterior pelvis/hip, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh.
- *ROM Concern(s)*: entire lumbar spine and cervical extension was recorded as moderately reduced with pain noted.

### Assessment:

## ASSESSMENT:

## Chart Notes

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

Patient: Blaine, Cindy

DOB: 05/26/1963

Ins Co

Pol #

Insured

Date 06/21/2017

Provider Dr. Jacob Young

\*\*\* continued from previous page \*\*\*

Cindy is of fair health and is expected to make fair progress and recovery with few residuals. She has duration of current episode longer than 1 month, obesity, older age, osteoarthritis, patient compliance, positive radiographic findings and waiting more than 7 days to seek treatment and no noted contraindications to chiropractic care. Based on her history and examination, it is reasonable to believe that her recovery may take longer than an average patient with an uncomplicated case.

### DIAGNOSIS:

Upon consideration of the information available I have diagnosed Cindy Blaine with: (M54.42) Lumbago w/ sciatica, LT side, (M62.830) Muscle spasm of back, (M99.03) Seg and somatic dysf of lumbar reg, (M99.05) Seg and somatic dysf of pelvic reg, (M99.04) Seg and somatic dysf of sacral reg, (M25.552) Pain in LT hip, (M25.551) Pain in RT hip, (M79.671) Pain in right foot, (M99.06) Seg and somatic dysf of lower extremity, (M40.03) Postural kyphosis, cervicothoracic region, (M54.6) Pain in thoracic spine, (M99.02) Seg and somatic dysf of thoracic reg, (M54.2) Cervicalgia, (M99.01) Seg and somatic dysf of cervical reg

**Daily Assessment:** same and meeting expectations as indicated in today's subjective.

- *Current Status:* Has stayed the same because she is expected to respond to care shortly and is showing improved function.

### Plan:

### TREATMENT PLAN:

Cindy's treatment plan for this episode began on 06/05/2017 and is projected to be completed by 08/28/2017.

- *Home/Self Care:* Cindy was instructed in home care recommendations that included: home cold pack issued today. She was instructed to ice for 20 minutes for pain, repeat after 60 minutes and discontinue after 3 hours

- **Chief Complaint:** right anterior pelvis/hip, left anterior pelvis/hip, right anterior thigh, right dorsal foot, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh

- *Functional Deficit:* Cindy reports employment has become difficult due to some or all of the following: bending over, concentrating, exercising, getting to sleep, performing household chores, lifting objects, looking over shoulder, reaching overhead, rising out of chair or bed, sitting, standing, staying asleep, using a computer and walking when she does this more than 3 minutes

- *Short Term Tx Goal:* To increase her ability to perform the above to 30 minutes by the re-exam date within 30 days unless improvement warrants discharge sooner.

- *Long Term Goal:* Attain pre-condition/pre-injury status

- **Primary Treatment:** Diversified, Drop Table and Manual- Chiropractic Manipulative Therapy (CMT) (approx: 36 visits) to the cervical dorsal spinal region, lumbar spinal region, lumbosacral spinal region, sacral spinal region, sacroiliac spinal region, thoraco-lumbar spinal region, thoracic spinal region, pelvic spinal region, left knee, left leg, right foot and right knee at a frequency and duration of 3 visits per week for next 12 weeks followed by a re-exam within 30 days.

- *Tx Effectiveness:* Overall effectiveness of treatment for this complaint will be evaluated by analyzing the Back Bournemouth Questionnaire functional outcome assessment tool. The beginning score or percentage was 74 disability and the goal score or percentage is 10% or better.

Revised Oswestry was 56 % disability.

Lower Extremity Assessment was 71% disability.

- **Traction:** *Y-Axis mechanical traction* applied to bilateral cervico-thoracic and lumbo-sacral to increase

**Chart Notes**

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

<b>Patient:</b> Blaine, Cindy	<b>DOB:</b> 05/26/1963	
<b>Ins Co</b>	<b>Pol #</b>	<b>Insured</b>

**Date** 06/21/2017

**Provider** Dr. Jacob Young \*\*\* continued from previous page \*\*\*

joint mobility during relief phase treatment. For 8 minutes 3 visits per week for next 12 weeks

- **Therapeutic Exercise-Patient consented: Manual stretching** therapeutic exercises performed to the bilateral muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 15 minutes for 2 reps - 2 sets to improve kinesthetic sense, to improve posture and to improve coordination during therapeutic phase treatment. For 15 minutes at a frequency and duration of 3 visits per week for next 12 weeks

- **Therapeutic Exercise: Whole body vibration** therapeutic exercises were performed to the bilateral muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the upper leg and muscle group of the lower leg region(s) for 5 minutes for 1 reps - 1 sets to improve kinesthetic sense, to improve posture, to improve coordination, to improve proprioception for sitting activities and to improve proprioception for standing activities during therapeutic phase treatment. For 5 minutes at frequency and duration of 3 visits per week for weeks 5-12

- **Therapeutic Exercise: Static weight** assisted Therapeutic Exercises performed to the bilateral muscle group of the upper to mid cervical, muscle group of the mid to lower cervical, muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 8 minutes with 3-6 lbs for 1 reps - 1 sets to improve kinesthetic sense, to improve posture, to improve coordination, to improve proprioception for sitting activities and to improve proprioception for standing activities during therapeutic phase treatment. For 8 minutes at a frequency and duration of 3 visits per week for weeks 5-12

- **Therapeutic Exercise: Resistance band** assisted therapeutic exercises performed to the bilateral muscle group of the upper to mid cervical, muscle group of the mid to lower cervical, muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 10 minutes with medium resistance band for 10-50 reps - 1 sets to improve kinesthetic sense, to improve posture and to improve coordination during therapeutic phase treatment. For 10 minutes at a frequency and duration of 3 visits per week for weeks 9-12

**Today's Treatment:**

- **Chief Complaint:** right anterior pelvis/hip, left anterior pelvis/hip, left anterior thigh, right dorsal foot, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh

- **Primary Treatment:** Diversified, Drop Table and Manual- Chiropractic Manipulative Therapy (CMT) to the C1, C6, T2, T6, T11, L1, L5, sacrum and left pelvis spinal level(s). -- -- --

- **Traction: Y-Axis mechanical traction** applied to cervico-thoracic and lumbo-sacral for 8 minutes. Exercise began at 9:30. Exercise completed at 9:38.

- **Therapeutic Exercise-Patient consented: Manual stretching** Therapeutic Exercises performed as detailed in the initial treatment plan for 15 minutes.

Exercise began at 9:38. Therapeutic wobble chair: 25 reps each of side to side, front to back, clockwise rotation, counterclockwise rotations. Cervical extension traction: 20 reps with 20 second hold on final rep-increase by 10 reps each week. Cervical/Lumbar extension traction stretch: 3 minutes. Beginner floor exercises: single knee to chest, both knees to chest, single knee to opposite shoulder, pelvic tilt, pelvic tilt with lift, cat/camel: each performed 2 times for 15-20 second hold. Precor stretchtrainer: lower back, upper back, shoulders, hips/gluteals: each performed 2 times for 15 seconds. Exercise completed at 9:53.

- **Advised**

**Chart Notes**

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

---

<b>Patient:</b> Blaine, Cindy	<b>DOB:</b> 05/26/1963	
<b>Ins Co</b>	<b>Pol #</b>	<b>Insured</b>

---

**Date** 06/21/2017

**Provider** Dr. Jacob Young \*\*\* continued from previous page \*\*\*

- *Tx Effect:* Treatment rendered without incident and responding as expected.
- *Next Visit:* continue with treatment plan as scheduled

**Diagnosis** M54.42: Lumbago w/ sciatica, LT side  
M62.830: Muscle spasm of back  
M99.03: Seg and somatic dysf of lumbar reg  
M99.05: Seg and somatic dysf of pelvic reg  
M99.04: Seg and somatic dysf of sacral reg  
M25.552: Pain in LT hip  
M25.551: Pain in RT hip  
M79.671: Pain in right foot  
M99.06: Seg and somatic dysf of lower extremity  
M40.03: Postural kyphosis, cervicothoracic region  
M54.6: Pain in thoracic spine  
M99.02: Seg and somatic dysf of thoracic reg  
M54.2: Cervicalgia  
M99.01: Seg and somatic dysf of cervical reg

Electronically Signed



Dr. Jacob Young 07/14/2017 08:10 AM

---

## Chart Notes

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

---

Patient: Blaine, Cindy

DOB: 05/26/1963

Ins Co

Pol #

Insured

---

Date 06/23/2017

Provider Dr. Jacob Young

---

### Subjective:

Cindy sought treatment today, complaining of continuous burning and throbbing discomfort in the low back. She describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 9 and indicated that the discomfort occurs approximately 90% of the time. She states the discomfort is worse since her last visit.

Cindy also complained of continuous burning and throbbing discomfort in the back of the left hip. She describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 10 and indicated that the discomfort occurs approximately 100% of the time. She states the discomfort is worse since her last visit.

Cindy also complained of continuous sharp and throbbing discomfort in the top of the right foot. She describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 10 and indicated that the discomfort occurs approximately 100% of the time. She states the discomfort is worse since her last visit.

### Objective:

#### Daily Objective Findings:

- *Spinal Restriction(s)/Subluxation(s)*: C2, C6, T2, T6, T10, L1, L5, sacrum and left pelvis
- *Extraspinal Restrictions/Subluxations*: - - - - .
- *Pain/Tenderness*: cervico-thoracic, upper thoracic, lower lumbar, lumbo-sacral, sacral, upper leg and foot
- *Postural Analysis*: short right leg (pelvic deficiency), head forward flexed, head rotation right, high right shoulder, thoracic hyperkyphosis and high left hip.
- *Muscle Spasm(s)*: moderate muscle spasms in the following areas; left anterior pelvis/hip, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh.
- *ROM Concern(s)*: entire lumbar spine and cervical extension was recorded as moderately reduced with pain noted.

### Assessment:

#### ASSESSMENT:

Cindy is of fair health and is expected to make fair progress and recovery with few residuals. She has duration of current episode longer than 1 month, obesity, older age, osteoarthritis, patient compliance, positive radiographic findings and waiting more than 7 days to seek treatment and no noted contraindications to chiropractic care. Based on her history and examination, it is reasonable to believe that her recovery may take longer than an average patient with an uncomplicated case.

**Chart Notes**

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

<b>Patient:</b> Blaine, Cindy	<b>DOB:</b> 05/26/1963	
<b>Ins Co</b>	<b>Pol #</b>	<b>Insured</b>

**Date** 06/23/2017

**Provider** Dr. Jacob Young \*\*\* continued from previous page \*\*\*

**DIAGNOSIS:**

Upon consideration of the information available I have diagnosed Cindy Blaine with: (M54.42) Lumbago w/ sciatica, LT side, (M62.830) Muscle spasm of back, (M99.03) Seg and somatic dysf of lumbar reg, (M99.05) Seg and somatic dysf of pelvic reg, (M99.04) Seg and somatic dysf of sacral reg, (M25.552) Pain in LT hip, (M25.551) Pain in RT hip, (M79.671) Pain in right foot, (M99.06) Seg and somatic dysf of lower extremity, (M40.03) Postural kyphosis, cervicothoracic region, (M54.6) Pain in thoracic spine, (M99.02) Seg and somatic dysf of thoracic reg, (M54.2) Cervicalgia, (M99.01) Seg and somatic dysf of cervical reg

**Daily Assessment:** worse and outside referral necessary as indicated in today's subjective.

- *Current Status:* Has stayed the same because she is expected to respond to care shortly and is showing improved function.

**Plan:**

**TREATMENT PLAN:**

Cindy's treatment plan for this episode began on 06/05/2017 and is projected to be completed by 08/28/2017.

- *Home/Self Care:* Cindy was instructed in home care recommendations that included: home cold pack issued today. She was instructed to ice for 20 minutes for pain, repeat after 60 minutes and discontinue after 3 hours

- **Chief Complaint:** right anterior pelvis/hip, left anterior pelvis/hip, right anterior thigh, right dorsal foot, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh

- *Functional Deficit:* Cindy reports employment has become difficult due to some or all of the following: bending over, concentrating, exercising, getting to sleep, performing household chores, lifting objects, looking over shoulder, reaching overhead, rising out of chair or bed, sitting, standing, staying asleep, using a computer and walking when she does this more than 3 minutes

- *Short Term Tx Goal:* To increase her ability to perform the above to 30 minutes by the re-exam date within 30 days unless improvement warrants discharge sooner.

- *Long Term Goal:* Attain pre-condition/pre-injury status

- **Primary Treatment:** Diversified, Drop Table and Manual- Chiropractic Manipulative Therapy (CMT) (approx: 36 visits) to the cervical dorsal spinal region, lumbar spinal region, lumbosacral spinal region, sacral spinal region, sacroiliac spinal region, thoraco-lumbar spinal region, thoracic spinal region, pelvic spinal region, left knee, left leg, right foot and right knee at a frequency and duration of 3 visits per week for next 12 weeks followed by a re-exam within 30 days.

- *Tx Effectiveness:* Overall effectiveness of treatment for this complaint will be evaluated by analyzing the Back Bournemouth Questionnaire functional outcome assessment tool. The beginning score or percentage was 74 disability and the goal score or percentage is 10% or better.

Revised Oswestry was 56 % disability.

Lower Extremity Assessment was 71% disability.

- **Traction: Y-Axis mechanical traction** applied to bilateral cervico-thoracic and lumbo-sacral to increase joint mobility during relief phase treatment. For 8 minutes 3 visits per week for next 12 weeks

- **Therapeutic Exercise-Patient consented: Manual stretching** therapeutic exercises performed to the bilateral muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 15 minutes for 2 reps - 2 sets to improve kinesthetic sense, to improve posture and to improve coordination during therapeutic phase treatment. For 15 minutes at a frequency and duration of 3 visits per week for next 12

**Chart Notes**

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

<b>Patient:</b> Blaine, Cindy	<b>DOB:</b> 05/26/1963	
<b>Ins Co</b>	<b>Pol #</b>	<b>Insured</b>

**Date** 06/23/2017

**Provider** Dr. Jacob Young \*\*\* continued from previous page \*\*\*

weeks

- **Therapeutic Exercise: Whole body vibration** therapeutic exercises were performed to the bilateral muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the upper leg and muscle group of the lower leg region(s) for 5 minutes for 1 reps - 1 sets to improve kinesthetic sense, to improve posture, to improve coordination, to improve proprioception for sitting activities and to improve proprioception for standing activities during therapeutic phase treatment. For 5 minutes at frequency and duration of 3 visits per week for weeks 5-12

- **Therapeutic Exercise: Static weight** assisted Therapeutic Exercises performed to the bilateral muscle group of the upper to mid cervical, muscle group of the mid to lower cervical, muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 8 minutes with 3-6 lbs for 1 reps - 1 sets to improve kinesthetic sense, to improve posture, to improve coordination, to improve proprioception for sitting activities and to improve proprioception for standing activities during therapeutic phase treatment. For 8 minutes at a frequency and duration of 3 visits per week for weeks 5-12

- **Therapeutic Exercise: Resistance band** assisted therapeutic exercises performed to the bilateral muscle group of the upper to mid cervical, muscle group of the mid to lower cervical, muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 10 minutes with medium resistance band for 10-50 reps - 1 sets to improve kinesthetic sense, to improve posture and to improve coordination during therapeutic phase treatment. For 10 minutes at a frequency and duration of 3 visits per week for weeks 9-12

**Today's Treatment:**

- **Chief Complaint:** right anterior pelvis/hip, left anterior pelvis/hip, left anterior thigh, right dorsal foot, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh

- **Primary Treatment:** Diversified, Drop Table and Manual- Chiropractic Manipulative Therapy (CMT) to the C2, C6, T2, T6, T10, L1, L5, sacrum and left pelvis spinal level(s). -- -- --

- **Traction: Y-Axis mechanical traction** applied to cervico-thoracic and lumbo-sacral for 8 minutes. Exercise began at 9:26. Exercise completed at 9:34.

- **Therapeutic Exercise-Patient consented: Manual stretching** Therapeutic Exercises performed as detailed in the initial treatment plan for 15 minutes.

Exercise began at 9:34. Therapeutic wobble chair: 25 reps each of side to side, front to back, clockwise rotation, counterclockwise rotations. Cervical extension traction: 20 reps with 20 second hold on final rep-increase by 10 reps each week. Cervical/Lumbar extension traction stretch: 3 minutes. Beginner floor exercises: single knee to chest, both knees to chest, single knee to opposite shoulder, pelvic tilt, pelvic tilt with lift, cat/camel: each performed 2 times for 15-20 second hold. Precor stretchtrainer: lower back, upper back, shoulders, hips/gluteals: each performed 2 times for 15 seconds. Exercise completed at 9:49.

**- Advised**

- **Tx Effect:** Treatment rendered without incident and responding as expected.

- **Next Visit:** continue with treatment plan as scheduled

**Chart Notes**

**Cindy Blaine**

**Black & Gold Chiropractic & Wellness**  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

---

<b>Patient:</b> Blaine, Cindy	<b>DOB:</b> 05/26/1963	
<b>Ins Co</b>	<b>Pol #</b>	<b>Insured</b>

---

**Date** 06/23/2017

**Provider** Dr. Jacob Young

**\*\*\* continued from previous page \*\*\***

**Diagnosis** M54.42: Lumbago w/ sciatica, LT side  
M62.830: Muscle spasm of back  
M99.03: Seg and somatic dysf of lumbar reg  
M99.05: Seg and somatic dysf of pelvic reg  
M99.04: Seg and somatic dysf of sacral reg  
M25.552: Pain in LT hip  
M25.551: Pain in RT hip  
M79.671: Pain in right foot  
M99.06: Seg and somatic dysf of lower extremity  
M40.03: Postural kyphosis, cervicothoracic region  
M54.6: Pain in thoracic spine  
M99.02: Seg and somatic dysf of thoracic reg  
M54.2: Cervicalgia  
M99.01: Seg and somatic dysf of cervical reg

Electronically Signed



Dr. Jacob Young 07/14/2017 08:13 AM

---

## Chart Notes

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

---

Patient: Blaine, Cindy

DOB: 05/26/1963

Ins Co

Pol #

Insured

---

Date 06/26/2017

Provider Dr. Jacob Young

---

### Subjective:

Cindy sought treatment today, complaining of occasional aching and tightness discomfort in the low back. She describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 6 and indicated that the discomfort occurs approximately 60% of the time. She states the discomfort is better since her last visit.

Cindy also complained of intermittent burning and tingling discomfort in the back of the left hip. She describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 5 and indicated that the discomfort occurs approximately 60% of the time. She states the discomfort is better since her last visit.

Cindy also complained of occasional sharp and throbbing discomfort in the top of the right foot. She describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 6 and indicated that the discomfort occurs approximately 70% of the time. She states the discomfort is better since her last visit.

### Objective:

#### Daily Objective Findings:

- *Spinal Restriction(s)/Subluxation(s)*: C2, C6, T2, T5, T10, L2, L5, sacrum and left pelvis
- *Extraspinal Restrictions/Subluxations*: - - - - .
- *Pain/Tenderness*: cervico-thoracic, upper thoracic, lower lumbar, lumbo-sacral, sacral, upper leg and foot
- *Postural Analysis*: short right leg (pelvic deficiency), head forward flexed, head rotation right, high right shoulder, thoracic hyperkyphosis and high left hip.
- *Muscle Spasm(s)*: moderate muscle spasms in the following areas; left anterior pelvis/hip, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh.
- *ROM Concern(s)*: entire lumbar spine and cervical extension was recorded as moderately reduced with pain noted.

### Assessment:

#### ASSESSMENT:

Cindy is of fair health and is expected to make fair progress and recovery with few residuals. She has duration of current episode longer than 1 month, obesity, older age, osteoarthritis, patient compliance, positive radiographic findings and waiting more than 7 days to seek treatment and no noted contraindications to chiropractic care. Based on her history and examination, it is reasonable to believe that her recovery may take longer than an average patient with an uncomplicated case.

## Chart Notes

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

Patient: Blaine, Cindy

DOB: 05/26/1963

Ins Co

Pol #

Insured

Date 06/26/2017

Provider Dr. Jacob Young

\*\*\* continued from previous page \*\*\*

### DIAGNOSIS:

Upon consideration of the information available I have diagnosed Cindy Blaine with: (M54.42) Lumbago w/ sciatica, LT side, (M62.830) Muscle spasm of back, (M99.03) Seg and somatic dysf of lumbar reg, (M99.05) Seg and somatic dysf of pelvic reg, (M99.04) Seg and somatic dysf of sacral reg, (M25.552) Pain in LT hip, (M25.551) Pain in RT hip, (M79.671) Pain in right foot, (M99.06) Seg and somatic dysf of lower extremity, (M40.03) Postural kyphosis, cervicothoracic region, (M54.6) Pain in thoracic spine, (M99.02) Seg and somatic dysf of thoracic reg, (M54.2) Cervicalgia, (M99.01) Seg and somatic dysf of cervical reg

**Daily Assessment:** showing improvement and meeting expectations as indicated in today's subjective.

- *Current Status:* Improving because she is reporting less discomfort and is showing improved function.

### Plan:

### TREATMENT PLAN:

Cindy's treatment plan for this episode began on 06/05/2017 and is projected to be completed by 08/28/2017.

- *Home/Self Care:* Cindy was instructed in home care recommendations that included: home cold pack issued today. She was instructed to ice for 20 minutes for pain, repeat after 60 minutes and discontinue after 3 hours

- **Chief Complaint:** right anterior pelvis/hip, left anterior pelvis/hip, right anterior thigh, right dorsal foot, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh

- *Functional Deficit:* Cindy reports employment has become difficult due to some or all of the following: bending over, concentrating, exercising, getting to sleep, performing household chores, lifting objects, looking over shoulder, reaching overhead, rising out of chair or bed, sitting, standing, staying asleep, using a computer and walking when she does this more than 3 minutes

- *Short Term Tx Goal:* To increase her ability to perform the above to 30 minutes by the re-exam date within 30 days unless improvement warrants discharge sooner.

- *Long Term Goal:* Attain pre-condition/pre-injury status

- **Primary Treatment:** Diversified, Drop Table and Manual- Chiropractic Manipulative Therapy (CMT) (approx: 36 visits) to the cervical dorsal spinal region, lumbar spinal region, lumbosacral spinal region, sacral spinal region, sacroiliac spinal region, thoraco-lumbar spinal region, thoracic spinal region, pelvic spinal region, left knee, left leg, right foot and right knee at a frequency and duration of 3 visits per week for next 12 weeks followed by a re-exam within 30 days.

- *Tx Effectiveness:* Overall effectiveness of treatment for this complaint will be evaluated by analyzing the Back Bournemouth Questionnaire functional outcome assessment tool. The beginning score or percentage was 74 disability and the goal score or percentage is 10% or better.

Revised Oswestry was 56 % disability.

Lower Extremity Assessment was 71% disability.

- **Traction: Y-Axis mechanical traction** applied to bilateral cervico-thoracic and lumbo-sacral to increase joint mobility during relief phase treatment. For 8 minutes 3 visits per week for next 12 weeks

- **Therapeutic Exercise-Patient consented: Manual stretching** therapeutic exercises performed to the bilateral muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 15 minutes for 2 reps - 2 sets to improve kinesthetic sense, to improve posture and to improve coordination during therapeutic phase treatment. For 15 minutes at a frequency and duration of 3 visits per week for next 12 weeks

## Chart Notes

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

Patient: Blaine, Cindy

DOB: 05/26/1963

Ins Co

Pol #

Insured

Date 06/26/2017

Provider Dr. Jacob Young

\*\*\* continued from previous page \*\*\*

- **Therapeutic Exercise: Whole body vibration** therapeutic exercises were performed to the bilateral muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the upper leg and muscle group of the lower leg region(s) for 5 minutes for 1 reps - 1 sets to improve kinesthetic sense, to improve posture, to improve coordination, to improve proprioception for sitting activities and to improve proprioception for standing activities during therapeutic phase treatment. For 5 minutes at frequency and duration of 3 visits per week for weeks 5-12

- **Therapeutic Exercise: Static weight** assisted Therapeutic Exercises performed to the bilateral muscle group of the upper to mid cervical, muscle group of the mid to lower cervical, muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 8 minutes with 3-6 lbs for 1 reps - 1 sets to improve kinesthetic sense, to improve posture, to improve coordination, to improve proprioception for sitting activities and to improve proprioception for standing activities during therapeutic phase treatment. For 8 minutes at a frequency and duration of 3 visits per week for weeks 5-12

- **Therapeutic Exercise: Resistance band** assisted therapeutic exercises performed to the bilateral muscle group of the upper to mid cervical, muscle group of the mid to lower cervical, muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 10 minutes with medium resistance band for 10-50 reps - 1 sets to improve kinesthetic sense, to improve posture and to improve coordination during therapeutic phase treatment. For 10 minutes at a frequency and duration of 3 visits per week for weeks 9-12

### Today's Treatment:

- **Chief Complaint:** right anterior pelvis/hip, left anterior pelvis/hip, left anterior thigh, right dorsal foot, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh

- **Primary Treatment:** Diversified, Drop Table and Manual- Chiropractic Manipulative Therapy (CMT) to the C2, C6, T2, T5, T10, L2, L5, sacrum and left pelvis spinal level(s). -- -- --

- **Traction: Y-Axis mechanical traction** applied to cervico-thoracic and lumbo-sacral for 8 minutes. Exercise began at 12:03. Exercise completed at 12:11.

- **Therapeutic Exercise-Patient consented: Manual stretching** Therapeutic Exercises performed as detailed in the initial treatment plan for 15 minutes.

Exercise began at 12:11. Therapeutic wobble chair: 25 reps each of side to side, front to back, clockwise rotation, counterclockwise rotations. Cervical extension traction: 20 reps with 20 second hold on final rep-increase by 10 reps each week. Cervical/Lumbar extension traction stretch: 3 minutes. Beginner floor exercises: single knee to chest, both knees to chest, single knee to opposite shoulder, pelvic tilt, pelvic tilt with lift, cat/camel: each performed 2 times for 15-20 second hold. Precor stretchtrainer: lower back, upper back, shoulders, hips/gluteals: each performed 2 times for 15 seconds. Exercise completed at 12:26.

### - Advised

- **Tx Effect:** Treatment rendered without incident and responding as expected.

- **Next Visit:** continue with treatment plan as scheduled

**Chart Notes**

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

---

<b>Patient:</b> Blaine, Cindy	<b>DOB:</b> 05/26/1963	
<b>Ins Co</b>	<b>Pol #</b>	<b>Insured</b>

---

**Date** 06/26/2017

**Provider** Dr. Jacob Young

**\*\*\* continued from previous page \*\*\***

**Diagnosis** M54.42: Lumbago w/ sciatica, LT side  
M62.830: Muscle spasm of back  
M99.03: Seg and somatic dysf of lumbar reg  
M99.05: Seg and somatic dysf of pelvic reg  
M99.04: Seg and somatic dysf of sacral reg  
M25.552: Pain in LT hip  
M25.551: Pain in RT hip  
M79.671: Pain in right foot  
M99.06: Seg and somatic dysf of lower extremity  
M40.03: Postural kyphosis, cervicothoracic region  
M54.6: Pain in thoracic spine  
M99.02: Seg and somatic dysf of thoracic reg  
M54.2: Cervicalgia  
M99.01: Seg and somatic dysf of cervical reg

Electronically Signed



Dr. Jacob Young 07/14/2017 08:16 AM

---

## Chart Notes

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

---

Patient: Blaine, Cindy

DOB: 05/26/1963

Ins Co

Pol #

Insured

---

Date 06/28/2017

Provider Dr. Jacob Young

---

### Subjective:

Cindy sought treatment today, complaining of continuous burning and tightness discomfort in the low back. She describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 9 and indicated that the discomfort occurs approximately 90% of the time. She states the discomfort is worse since her last visit.

Cindy also complained of continuous burning and shooting discomfort in the back of the left hip. She describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 10 and indicated that the discomfort occurs approximately 100% of the time. She states the discomfort is worse since her last visit.

Cindy also complained of intermittent burning and shooting discomfort in the left hamstring. She describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 8 and indicated that the discomfort occurs approximately 90% of the time. She states the discomfort is worse since her last visit.

Cindy also complained of intermittent burning and shooting discomfort in the side of the right thigh. She describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 8 and indicated that the discomfort occurs approximately 90% of the time. She states the discomfort is worse since her last visit.

Cindy also complained of continuous sharp and aching discomfort in the top of the right foot. She describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 10 and indicated that the discomfort occurs approximately 100% of the time. She states the discomfort is worse since her last visit.

### Objective:

#### Daily Objective Findings:

- *Spinal Restriction(s)/Subluxation(s)*: C1, C6, T2, T6, T11, L1, L5, sacrum and left pelvis
- *Extraspinal Restrictions/Subluxations*: - - - - .
- *Pain/Tenderness*: cervico-thoracic, upper thoracic, lower lumbar, lumbo-sacral, sacral, upper leg and foot
- *Postural Analysis*: short right leg (pelvic deficiency), head forward flexed, head rotation right, high right shoulder, thoracic hyperkyphosis and high left hip.
- *Muscle Spasm(s)*: moderate muscle spasms in the following areas; left anterior pelvis/hip, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left

## Chart Notes

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

Patient: Blaine, Cindy

DOB: 05/26/1963

Ins Co

Pol #

Insured

Date 06/28/2017

Provider Dr. Jacob Young

\*\*\* continued from previous page \*\*\*

posterior thigh.

- ROM Concern(s): entire lumbar spine and cervical extension was recorded as moderately reduced with pain noted.

### Assessment:

### ASSESSMENT:

Cindy is of fair health and is expected to make fair progress and recovery with few residuals. She has duration of current episode longer than 1 month, obesity, older age, osteoarthritis, patient compliance, positive radiographic findings and waiting more than 7 days to seek treatment and no noted contraindications to chiropractic care. Based on her history and examination, it is reasonable to believe that her recovery may take longer than an average patient with an uncomplicated case.

### DIAGNOSIS:

Upon consideration of the information available I have diagnosed Cindy Blaine with: (M54.42) Lumbago w/ sciatica, LT side, (M62.830) Muscle spasm of back, (M99.03) Seg and somatic dysf of lumbar reg, (M99.05) Seg and somatic dysf of pelvic reg, (M99.04) Seg and somatic dysf of sacral reg, (M25.552) Pain in LT hip, (M25.551) Pain in RT hip, (M79.671) Pain in right foot, (M99.06) Seg and somatic dysf of lower extremity, (M40.03) Postural kyphosis, cervicothoracic region, (M54.6) Pain in thoracic spine, (M99.02) Seg and somatic dysf of thoracic reg, (M54.2) Cervicalgia, (M99.01) Seg and somatic dysf of cervical reg

**Daily Assessment:** worse and continued same diagnosis as indicated in today's subjective.

- *Current Status:* Has stayed the same because she is expected to show improvement long period of Tx and is showing improved function.

### Plan:

### TREATMENT PLAN:

Cindy's treatment plan for this episode began on 06/05/2017 and is projected to be completed by 08/28/2017.

- *Home/Self Care:* Cindy was instructed in home care recommendations that included: home cold pack issued today. She was instructed to ice for 20 minutes for pain, repeat after 60 minutes and discontinue after 3 hours

- **Chief Complaint:** right anterior pelvis/hip, left anterior pelvis/hip, right anterior thigh, right dorsal foot, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh

- *Functional Deficit:* Cindy reports employment has become difficult due to some or all of the following: bending over, concentrating, exercising, getting to sleep, performing household chores, lifting objects, looking over shoulder, reaching overhead, rising out of chair or bed, sitting, standing, staying asleep, using a computer and walking when she does this more than 3 minutes

- *Short Term Tx Goal:* To increase her ability to perform the above to 30 minutes by the re-exam date within 30 days unless improvement warrants discharge sooner.

- *Long Term Goal:* Attain pre-condition/pre-injury status

- **Primary Treatment:** Diversified, Drop Table and Manual- Chiropractic Manipulative Therapy (CMT) (approx: 36 visits) to the cervical dorsal spinal region, lumbar spinal region, lumbosacral spinal region, sacral spinal region, sacroiliac spinal region, thoraco-lumbar spinal region, thoracic spinal region, pelvic spinal region, left

**Chart Notes**

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

<b>Patient:</b> Blaine, Cindy	<b>DOB:</b> 05/26/1963	
<b>Ins Co</b>	<b>Pol #</b>	<b>Insured</b>

**Date** 06/28/2017

**Provider** Dr. Jacob Young \*\*\* continued from previous page \*\*\*

knee, left leg, right foot and right knee at a frequency and duration of 3 visits per week for next 12 weeks followed by a re-exam within 30 days.

- **Tx Effectiveness:** Overall effectiveness of treatment for this complaint will be evaluated by analyzing the Back Bournemouth Questionnaire functional outcome assessment tool. The beginning score or percentage was 74 disability and the goal score or percentage is 10% or better.

Revised Oswestry was 56 % disability.

Lower Extremity Assessment was 71% disability.

- **Traction: Y-Axis mechanical traction** applied to bilateral cervico-thoracic and lumbo-sacral to increase joint mobility during relief phase treatment. For 8 minutes 3 visits per week for next 12 weeks

- **Therapeutic Exercise-Patient consented: Manual stretching** therapeutic exercises performed to the bilateral muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 15 minutes for 2 reps - 2 sets to improve kinesthetic sense, to improve posture and to improve coordination during therapeutic phase treatment. For 15 minutes at a frequency and duration of 3 visits per week for next 12 weeks

- **Therapeutic Exercise: Whole body vibration** therapeutic exercises were performed to the bilateral muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the upper leg and muscle group of the lower leg region(s) for 5 minutes for 1 reps - 1 sets to improve kinesthetic sense, to improve posture, to improve coordination, to improve proprioception for sitting activities and to improve proprioception for standing activities during therapeutic phase treatment. For 5 minutes at frequency and duration of 3 visits per week for weeks 5-12

- **Therapeutic Exercise: Static weight** assisted Therapeutic Exercises performed to the bilateral muscle group of the upper to mid cervical, muscle group of the mid to lower cervical, muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 8 minutes with 3-6 lbs for 1 reps - 1 sets to improve kinesthetic sense, to improve posture, to improve coordination, to improve proprioception for sitting activities and to improve proprioception for standing activities during therapeutic phase treatment. For 8 minutes at a frequency and duration of 3 visits per week for weeks 5-12

- **Therapeutic Exercise: Resistance band** assisted therapeutic exercises performed to the bilateral muscle group of the upper to mid cervical, muscle group of the mid to lower cervical, muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 10 minutes with medium resistance band for 10-50 reps - 1 sets to improve kinesthetic sense, to improve posture and to improve coordination during therapeutic phase treatment. For 10 minutes at a frequency and duration of 3 visits per week for weeks 9-12

**Today's Treatment:**

- **Chief Complaint:** right anterior pelvis/hip, left anterior pelvis/hip, left anterior thigh, right dorsal foot, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh

- **Primary Treatment:** Diversified, Drop Table and Manual- Chiropractic Manipulative Therapy (CMT) to the C1, C6, T2, T6, T11, L1, L5, sacrum and left pelvis spinal level(s). -- -- --

- **Traction: Y-Axis mechanical traction** applied to cervico-thoracic and lumbo-sacral for 8 minutes. Exercise began at 9:11. Exercise completed at 9:19.

- **Therapeutic Exercise-Patient consented: Manual stretching** Therapeutic Exercises performed as

**Chart Notes**

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

<b>Patient:</b> Blaine, Cindy	<b>DOB:</b> 05/26/1963	
<b>Ins Co</b>	<b>Pol #</b>	<b>Insured</b>

**Date** 06/28/2017

**Provider** Dr. Jacob Young \*\*\* continued from previous page \*\*\*

detailed in the initial treatment plan for 15 minutes.

Exercise began at 9:19. Therapeutic wobble chair: 25 reps each of side to side, front to back, clockwise rotation, counterclockwise rotations. Cervical extension traction: 20 reps with 20 second hold on final rep-increase by 10 reps each week. Cervical/Lumbar extension traction stretch: 3 minutes. Beginner floor exercises: single knee to chest, both knees to chest, single knee to opposite shoulder, pelvic tilt, pelvic tilt with lift, cat/camel: each performed 2 times for 15-20 second hold. Precor stretchtrainer: lower back, upper back, shoulders, hips/gluteals: each performed 2 times for 15 seconds. Exercise completed at 9:34.

**- Advised**

- *Tx Effect:* Treatment rendered without incident and responding as expected.
- *Next Visit:* continue with treatment plan as scheduled

- Diagnosis**
- M54.42: Lumbago w/ sciatica, LT side
  - M62.830: Muscle spasm of back
  - M99.03: Seg and somatic dysf of lumbar reg
  - M99.05: Seg and somatic dysf of pelvic reg
  - M99.04: Seg and somatic dysf of sacral reg
  - M25.552: Pain in LT hip
  - M25.551: Pain in RT hip
  - M79.671: Pain in right foot
  - M99.06: Seg and somatic dysf of lower extremity
  - M40.03: Postural kyphosis, cervicothoracic region
  - M54.6: Pain in thoracic spine
  - M99.02: Seg and somatic dysf of thoracic reg
  - M54.2: Cervicalgia
  - M99.01: Seg and somatic dysf of cervical reg

Electronically Signed



Dr. Jacob Young 07/14/2017 08:19 AM

## Chart Notes

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

Patient: Blaine, Cindy

DOB: 05/26/1963

Ins Co

Pol #

Insured

Date 06/29/2017

Provider Dr. Jacob Young

### Subjective:

Cindy sought treatment today, complaining of intermittent burning, tightness and throbbing discomfort in the low back. She describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 9 and indicated that the discomfort occurs approximately 80% of the time. She states the discomfort is worse since her last visit.

Cindy also complained of continuous burning, shooting and throbbing discomfort in the back of the left hip. She describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 10 and indicated that the discomfort occurs approximately 100% of the time. She states the discomfort is worse since her last visit.

Cindy also complained of continuous sharp and throbbing discomfort in the top of the right foot. She describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 10 and indicated that the discomfort occurs approximately 100% of the time. She states the discomfort is worse since her last visit.

### Objective:

#### Daily Objective Findings:

- *Spinal Restriction(s)/Subluxation(s)*: C2, C6, T2, T6, T10, L1, L5, sacrum and left pelvis
- *Extraspinal Restrictions/Subluxations*: - - - - .
- *Pain/Tenderness*: cervico-thoracic, upper thoracic, lower lumbar, lumbo-sacral, sacral, upper leg and foot
- *Postural Analysis*: short right leg (pelvic deficiency), head forward flexed, head rotation right, high right shoulder, thoracic hyperkyphosis and high left hip.
- *Muscle Spasm(s)*: moderate muscle spasms in the following areas; left anterior pelvis/hip, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh.
- *ROM Concern(s)*: entire lumbar spine and cervical extension was recorded as moderately reduced with pain noted.

### Assessment:

#### ASSESSMENT:

Cindy is of fair health and is expected to make fair progress and recovery with few residuals. She has duration of current episode longer than 1 month, obesity, older age, osteoarthritis, patient compliance, positive radiographic findings and waiting more than 7 days to seek treatment and no noted contraindications to chiropractic care. Based on her history and examination, it is reasonable to believe that her recovery may take longer than an average patient with an uncomplicated case.

## Chart Notes

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

Patient: Blaine, Cindy

DOB: 05/26/1963

Ins Co

Pol #

Insured

Date 06/29/2017

Provider Dr. Jacob Young

\*\*\* continued from previous page \*\*\*

### DIAGNOSIS:

Upon consideration of the information available I have diagnosed Cindy Blaine with: (M54.42) Lumbago w/ sciatica, LT side, (M62.830) Muscle spasm of back, (M99.03) Seg and somatic dysf of lumbar reg, (M99.05) Seg and somatic dysf of pelvic reg, (M99.04) Seg and somatic dysf of sacral reg, (M25.552) Pain in LT hip, (M25.551) Pain in RT hip, (M79.671) Pain in right foot, (M99.06) Seg and somatic dysf of lower extremity, (M40.03) Postural kyphosis, cervicothoracic region, (M54.6) Pain in thoracic spine, (M99.02) Seg and somatic dysf of thoracic reg, (M54.2) Cervicalgia, (M99.01) Seg and somatic dysf of cervical reg

**Daily Assessment:** worse, continued same diagnosis and outside referral necessary as indicated in today's subjective.

- *Current Status:* Has stayed the same because she is expected to respond to care shortly and is showing improved function.

### Plan:

### TREATMENT PLAN:

Cindy's treatment plan for this episode began on 06/05/2017 and is projected to be completed by 08/28/2017.

- *Home/Self Care:* Cindy was instructed in home care recommendations that included: home cold pack issued today. She was instructed to ice for 20 minutes for pain, repeat after 60 minutes and discontinue after 3 hours

- **Chief Complaint:** right anterior pelvis/hip, left anterior pelvis/hip, right anterior thigh, right dorsal foot, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh

- *Functional Deficit:* Cindy reports employment has become difficult due to some or all of the following: bending over, concentrating, exercising, getting to sleep, performing household chores, lifting objects, looking over shoulder, reaching overhead, rising out of chair or bed, sitting, standing, staying asleep, using a computer and walking when she does this more than 3 minutes

- *Short Term Tx Goal:* To increase her ability to perform the above to 30 minutes by the re-exam date within 30 days unless improvement warrants discharge sooner.

- *Long Term Goal:* Attain pre-condition/pre-injury status

- **Primary Treatment:** Diversified, Drop Table and Manual- Chiropractic Manipulative Therapy (CMT) (approx: 36 visits) to the cervical dorsal spinal region, lumbar spinal region, lumbosacral spinal region, sacral spinal region, sacroiliac spinal region, thoraco-lumbar spinal region, thoracic spinal region, pelvic spinal region, left knee, left leg, right foot and right knee at a frequency and duration of 3 visits per week for next 12 weeks followed by a re-exam within 30 days.

- *Tx Effectiveness:* Overall effectiveness of treatment for this complaint will be evaluated by analyzing the Back Bournemouth Questionnaire functional outcome assessment tool. The beginning score or percentage was 74 disability and the goal score or percentage is 10% or better.

Revised Oswestry was 56 % disability.

Lower Extremity Assessment was 71% disability.

- **Traction: Y-Axis mechanical traction** applied to bilateral cervico-thoracic and lumbo-sacral to increase joint mobility during relief phase treatment. For 8 minutes 3 visits per week for next 12 weeks

- **Therapeutic Exercise-Patient consented: Manual stretching** therapeutic exercises performed to the bilateral muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 15 minutes for 2 reps - 2 sets to improve kinesthetic sense, to improve posture and to improve coordination

**Chart Notes**

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

<b>Patient:</b> Blaine, Cindy	<b>DOB:</b> 05/26/1963	
<b>Ins Co</b>	<b>Pol #</b>	<b>Insured</b>

**Date** 06/29/2017

**Provider** Dr. Jacob Young \*\*\* continued from previous page \*\*\*

during therapeutic phase treatment. For 15 minutes at a frequency and duration of 3 visits per week for next 12 weeks

- **Therapeutic Exercise: Whole body vibration** therapeutic exercises were performed to the bilateral muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the upper leg and muscle group of the lower leg region(s) for 5 minutes for 1 reps - 1 sets to improve kinesthetic sense, to improve posture, to improve coordination, to improve proprioception for sitting activities and to improve proprioception for standing activities during therapeutic phase treatment. For 5 minutes at frequency and duration of 3 visits per week for weeks 5-12

- **Therapeutic Exercise: Static weight** assisted Therapeutic Exercises performed to the bilateral muscle group of the upper to mid cervical, muscle group of the mid to lower cervical, muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 8 minutes with 3-6 lbs for 1 reps - 1 sets to improve kinesthetic sense, to improve posture, to improve coordination, to improve proprioception for sitting activities and to improve proprioception for standing activities during therapeutic phase treatment. For 8 minutes at a frequency and duration of 3 visits per week for weeks 5-12

- **Therapeutic Exercise: Resistance band** assisted therapeutic exercises performed to the bilateral muscle group of the upper to mid cervical, muscle group of the mid to lower cervical, muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 10 minutes with medium resistance band for 10-50 reps - 1 sets to improve kinesthetic sense, to improve posture and to improve coordination during therapeutic phase treatment. For 10 minutes at a frequency and duration of 3 visits per week for weeks 9-12

**Today's Treatment:**

- **Chief Complaint:** right anterior pelvis/hip, left anterior pelvis/hip, left anterior thigh, right dorsal foot, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh

- **Primary Treatment:** Diversified, Drop Table and Manual- Chiropractic Manipulative Therapy (CMT) to the C2, C6, T2, T6, T10, L1, L5, sacrum and left pelvis spinal level(s). -- -- --

- **Traction: Y-Axis mechanical traction** applied to cervico-thoracic and lumbo-sacral for 8 minutes. Exercise began at 9:18. Exercise completed at 9:26.

- **Therapeutic Exercise-Patient consented: Manual stretching** Therapeutic Exercises performed as detailed in the initial treatment plan for 15 minutes.

Exercise began at 9:26. Therapeutic wobble chair: 25 reps each of side to side, front to back, clockwise rotation, counterclockwise rotations. Cervical extension traction: 20 reps with 20 second hold on final rep-increase by 10 reps each week. Cervical/Lumbar extension traction stretch: 3 minutes. Beginner floor exercises: single knee to chest, both knees to chest, single knee to opposite shoulder, pelvic tilt, pelvic tilt with lift, cat/camel: each performed 2 times for 15-20 second hold. Precor stretchtrainer: lower back, upper back, shoulders, hips/gluteals: each performed 2 times for 15 seconds. Exercise completed at 9:41.

**- Advised**

- *Tx Effect:* Treatment rendered without incident and responding as expected.
- *Next Visit:* continue with treatment plan as scheduled

**Chart Notes**

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

---

<b>Patient:</b> Blaine, Cindy	<b>DOB:</b> 05/26/1963	
<b>Ins Co</b>	<b>Pol #</b>	<b>Insured</b>

---

**Date** 06/29/2017

**Provider** Dr. Jacob Young

**\*\*\* continued from previous page \*\*\***

**Diagnosis** M54.42: Lumbago w/ sciatica, LT side  
M62.830: Muscle spasm of back  
M99.03: Seg and somatic dysf of lumbar reg  
M99.05: Seg and somatic dysf of pelvic reg  
M99.04: Seg and somatic dysf of sacral reg  
M25.552: Pain in LT hip  
M25.551: Pain in RT hip  
M79.671: Pain in right foot  
M99.06: Seg and somatic dysf of lower extremity  
M40.03: Postural kyphosis, cervicothoracic region  
M54.6: Pain in thoracic spine  
M99.02: Seg and somatic dysf of thoracic reg  
M54.2: Cervicalgia  
M99.01: Seg and somatic dysf of cervical reg

Electronically Signed



Dr. Jacob Young 07/14/2017 08:21 AM

---

## Chart Notes

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

---

Patient: Blaine, Cindy

DOB: 05/26/1963

Ins Co

Pol #

Insured

---

Date 07/12/2017

Provider Dr. Jacob Young

---

### Subjective:

Cindy sought treatment today, complaining of intermittent burning, tightness and throbbing discomfort in the low back. She describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 9 and indicated that the discomfort occurs approximately 80% of the time. She states the discomfort is worse since her last visit.

Cindy also complained of continuous burning, shooting and throbbing discomfort in the back of the left hip. She describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 10 and indicated that the discomfort occurs approximately 100% of the time. She states the discomfort is worse since her last visit.

Cindy also complained of continuous sharp and throbbing discomfort in the top of the right foot. She describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 10 and indicated that the discomfort occurs approximately 100% of the time. She states the discomfort is worse since her last visit.

### Objective:

#### Daily Objective Findings:

- *Spinal Restriction(s)/Subluxation(s)*: C2, C6, T2, T6, T10, L3, L5 and left pelvis
- *Extraspinal Restrictions/Subluxations*: - - - - .
- *Pain/Tenderness*: cervico-thoracic, upper thoracic, lower lumbar, lumbo-sacral, sacral, upper leg and foot
- *Postural Analysis*: short right leg (pelvic deficiency), head forward flexed, head rotation right, high right shoulder, thoracic hyperkyphosis and high left hip.
- *Muscle Spasm(s)*: moderate muscle spasms in the following areas; left anterior pelvis/hip, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh.
- *ROM Concern(s)*: entire lumbar spine and cervical extension was recorded as moderately reduced with pain noted.

### Assessment:

#### ASSESSMENT:

Cindy is of fair health and is expected to make fair progress and recovery with few residuals. She has duration of current episode longer than 1 month, obesity, older age, osteoarthritis, patient compliance, positive radiographic findings and waiting more than 7 days to seek treatment and no noted contraindications to chiropractic care. Based on her history and examination, it is reasonable to believe that her recovery may take longer than an average patient with an uncomplicated case.

## Chart Notes

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

Patient: Blaine, Cindy

DOB: 05/26/1963

Ins Co

Pol #

Insured

Date 07/12/2017

Provider Dr. Jacob Young

\*\*\* continued from previous page \*\*\*

### DIAGNOSIS:

Upon consideration of the information available I have diagnosed Cindy Blaine with: (M54.42) Lumbago w/ sciatica, LT side, (M62.830) Muscle spasm of back, (M99.03) Seg and somatic dysf of lumbar reg, (M99.05) Seg and somatic dysf of pelvic reg, (M99.04) Seg and somatic dysf of sacral reg, (M25.552) Pain in LT hip, (M25.551) Pain in RT hip, (M79.671) Pain in right foot, (M99.06) Seg and somatic dysf of lower extremity, (M40.03) Postural kyphosis, cervicothoracic region, (M54.6) Pain in thoracic spine, (M99.02) Seg and somatic dysf of thoracic reg, (M54.2) Cervicalgia, (M99.01) Seg and somatic dysf of cervical reg

**Daily Assessment:** worse, continued same diagnosis and outside referral necessary as indicated in today's subjective.

- *Current Status:* Worsening because she is expected to respond to care shortly, is reporting more discomfort and is showing improved function.

### Plan:

### TREATMENT PLAN:

Cindy's treatment plan for this episode began on 06/05/2017 and is projected to be completed by 08/28/2017.

- *Home/Self Care:* Cindy was instructed in home care recommendations that included: home cold pack issued today. She was instructed to ice for 20 minutes for pain, repeat after 60 minutes and discontinue after 3 hours

- **Chief Complaint:** right anterior pelvis/hip, left anterior pelvis/hip, right anterior thigh, right dorsal foot, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh

- *Functional Deficit:* Cindy reports employment has become difficult due to some or all of the following: bending over, concentrating, exercising, getting to sleep, performing household chores, lifting objects, looking over shoulder, reaching overhead, rising out of chair or bed, sitting, standing, staying asleep, using a computer and walking when she does this more than 3 minutes

- *Short Term Tx Goal:* To increase her ability to perform the above to 30 minutes by the re-exam date within 30 days unless improvement warrants discharge sooner.

- *Long Term Goal:* Attain pre-condition/pre-injury status

- **Primary Treatment:** Diversified, Drop Table and Manual- Chiropractic Manipulative Therapy (CMT) (approx: 36 visits) to the cervical dorsal spinal region, lumbar spinal region, lumbosacral spinal region, sacral spinal region, sacroiliac spinal region, thoraco-lumbar spinal region, thoracic spinal region, pelvic spinal region, left knee, left leg, right foot and right knee at a frequency and duration of 3 visits per week for next 12 weeks followed by a re-exam within 30 days.

- *Tx Effectiveness:* Overall effectiveness of treatment for this complaint will be evaluated by analyzing the Back Bournemouth Questionnaire functional outcome assessment tool. The beginning score or percentage was 74 disability and the goal score or percentage is 10% or better.

Revised Oswestry was 56 % disability.

Lower Extremity Assessment was 71% disability.

- **Traction: Y-Axis mechanical traction** applied to bilateral cervico-thoracic and lumbo-sacral to increase joint mobility during relief phase treatment. For 8 minutes 3 visits per week for next 12 weeks

- **Therapeutic Exercise-Patient consented: Manual stretching** therapeutic exercises performed to the bilateral muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 15 minutes for 2 reps - 2 sets to improve kinesthetic sense, to improve posture and to improve coordination

**Chart Notes**

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

<b>Patient:</b> Blaine, Cindy	<b>DOB:</b> 05/26/1963	
<b>Ins Co</b>	<b>Pol #</b>	<b>Insured</b>

**Date** 07/12/2017

**Provider** Dr. Jacob Young \*\*\* continued from previous page \*\*\*

during therapeutic phase treatment. For 15 minutes at a frequency and duration of 3 visits per week for next 12 weeks

- **Therapeutic Exercise: Whole body vibration** therapeutic exercises were performed to the bilateral muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the upper leg and muscle group of the lower leg region(s) for 5 minutes for 1 reps - 1 sets to improve kinesthetic sense, to improve posture, to improve coordination, to improve proprioception for sitting activities and to improve proprioception for standing activities during therapeutic phase treatment. For 5 minutes at frequency and duration of 3 visits per week for weeks 5-12

- **Therapeutic Exercise: Static weight** assisted Therapeutic Exercises performed to the bilateral muscle group of the upper to mid cervical, muscle group of the mid to lower cervical, muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 8 minutes with 3-6 lbs for 1 reps - 1 sets to improve kinesthetic sense, to improve posture, to improve coordination, to improve proprioception for sitting activities and to improve proprioception for standing activities during therapeutic phase treatment. For 8 minutes at a frequency and duration of 3 visits per week for weeks 5-12

- **Therapeutic Exercise: Resistance band** assisted therapeutic exercises performed to the bilateral muscle group of the upper to mid cervical, muscle group of the mid to lower cervical, muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 10 minutes with medium resistance band for 10-50 reps - 1 sets to improve kinesthetic sense, to improve posture and to improve coordination during therapeutic phase treatment. For 10 minutes at a frequency and duration of 3 visits per week for weeks 9-12

**Today's Treatment:**

- **Chief Complaint:** right anterior pelvis/hip, left anterior pelvis/hip, left anterior thigh, right dorsal foot, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh

- **Primary Treatment:** Diversified, Drop Table and Manual- Chiropractic Manipulative Therapy (CMT) to the C2, C6, T2, T6, T10, L1, L5, sacrum and left pelvis spinal level(s). -- -- --

- **Traction: Y-Axis mechanical traction** applied to cervico-thoracic and lumbo-sacral for 8 minutes. Exercise began at 4:30. Exercise completed at 4:38.

- **Therapeutic Exercise-Patient consented: Manual stretching** Therapeutic Exercises performed as detailed in the initial treatment plan for 15 minutes.

Exercise began at 4:38. Therapeutic wobble chair: 25 reps each of side to side, front to back, clockwise rotation, counterclockwise rotations. Cervical extension traction: 20 reps with 20 second hold on final rep-increase by 10 reps each week. Cervical/Lumbar extension traction stretch: 3 minutes. Beginner floor exercises: single knee to chest, both knees to chest, single knee to opposite shoulder, pelvic tilt, pelvic tilt with lift, cat/camel: each performed 2 times for 15-20 second hold. Precor stretchtrainer: lower back, upper back, shoulders, hips/gluteals: each performed 2 times for 15 seconds. Exercise completed at 4:53.

**- Advised**

- *Tx Effect:* Treatment rendered without incident and responding as expected.
- *Next Visit:* continue with treatment plan as scheduled

**Chart Notes**

**Cindy Blaine**

**Black & Gold Chiropractic & Wellness**  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

---

<b>Patient:</b> Blaine, Cindy	<b>DOB:</b> 05/26/1963	
<b>Ins Co</b>	<b>Pol #</b>	<b>Insured</b>

---

**Date** 07/12/2017

**Provider** Dr. Jacob Young

**\*\*\* continued from previous page \*\*\***

**Diagnosis** M54.42: Lumbago w/ sciatica, LT side  
M62.830: Muscle spasm of back  
M99.03: Seg and somatic dysf of lumbar reg  
M99.05: Seg and somatic dysf of pelvic reg  
M99.04: Seg and somatic dysf of sacral reg  
M25.552: Pain in LT hip  
M25.551: Pain in RT hip  
M79.671: Pain in right foot  
M99.06: Seg and somatic dysf of lower extremity  
M40.03: Postural kyphosis, cervicothoracic region  
M54.6: Pain in thoracic spine  
M99.02: Seg and somatic dysf of thoracic reg  
M54.2: Cervicalgia  
M99.01: Seg and somatic dysf of cervical reg

Electronically Signed



Dr. Jacob Young 07/14/2017 08:24 AM

---

## Chart Notes

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

Patient: Blaine, Cindy

DOB: 05/26/1963

Ins Co

Pol #

Insured

Date 07/13/2017

Provider Dr. Jacob Young

### Subjective:

Cindy sought treatment today, complaining of intermittent burning, tightness and throbbing discomfort in the low back. She describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 9 and indicated that the discomfort occurs approximately 80% of the time. She states the discomfort is same since her last visit.

Cindy also complained of continuous burning, shooting and throbbing discomfort in the back of the left hip. She describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 10 and indicated that the discomfort occurs approximately 75% of the time. She states the discomfort is better since her last visit.

Cindy also complained of continuous sharp and throbbing discomfort in the top of the right foot. She describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 10 and indicated that the discomfort occurs approximately 100% of the time. She states the discomfort is same since her last visit.

### Objective:

#### Daily Objective Findings:

- *Spinal Restriction(s)/Subluxation(s)*: C2, C6, T2, T6, T10, L3, L5 and left pelvis
- *Extraspinal Restrictions/Subluxations*: - - - - .
- *Pain/Tenderness*: cervico-thoracic, upper thoracic, lower lumbar, lumbo-sacral, sacral, upper leg and foot
- *Postural Analysis*: short right leg (pelvic deficiency), head forward flexed, head rotation right, high right shoulder, thoracic hyperkyphosis and high left hip.
- *Muscle Spasm(s)*: moderate muscle spasms in the following areas; left anterior pelvis/hip, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh.
- *ROM Concern(s)*: entire lumbar spine and cervical extension was recorded as moderately reduced with pain noted.

### Assessment:

#### ASSESSMENT:

Cindy is of fair health and is expected to make fair progress and recovery with few residuals. She has duration of current episode longer than 1 month, obesity, older age, osteoarthritis, patient compliance, positive radiographic findings and waiting more than 7 days to seek treatment and no noted contraindications to chiropractic care. Based on her history and examination, it is reasonable to believe that her recovery may take longer than an average patient with an uncomplicated case.

## Chart Notes

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

Patient: Blaine, Cindy

DOB: 05/26/1963

Ins Co

Pol #

Insured

Date 07/13/2017

Provider Dr. Jacob Young

\*\*\* continued from previous page \*\*\*

### DIAGNOSIS:

Upon consideration of the information available I have diagnosed Cindy Blaine with: (M54.42) Lumbago w/ sciatica, LT side, (M62.830) Muscle spasm of back, (M99.03) Seg and somatic dysf of lumbar reg, (M99.05) Seg and somatic dysf of pelvic reg, (M99.04) Seg and somatic dysf of sacral reg, (M25.552) Pain in LT hip, (M25.551) Pain in RT hip, (M79.671) Pain in right foot, (M99.06) Seg and somatic dysf of lower extremity, (M40.03) Postural kyphosis, cervicothoracic region, (M54.6) Pain in thoracic spine, (M99.02) Seg and somatic dysf of thoracic reg, (M54.2) Cervicalgia, (M99.01) Seg and somatic dysf of cervical reg

**Daily Assessment:** same, continued same diagnosis and outside referral necessary as indicated in today's subjective.

- *Current Status:* Has stayed the same because she is expected to show improvement long period of Tx and is showing improved function.

### Plan:

### TREATMENT PLAN:

Cindy's treatment plan for this episode began on 06/05/2017 and is projected to be completed by 08/28/2017.

- *Home/Self Care:* Cindy was instructed in home care recommendations that included: home cold pack issued today. She was instructed to ice for 20 minutes for pain, repeat after 60 minutes and discontinue after 3 hours

- **Chief Complaint:** right anterior pelvis/hip, left anterior pelvis/hip, right anterior thigh, right dorsal foot, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh

- *Functional Deficit:* Cindy reports employment has become difficult due to some or all of the following: bending over, concentrating, exercising, getting to sleep, performing household chores, lifting objects, looking over shoulder, reaching overhead, rising out of chair or bed, sitting, standing, staying asleep, using a computer and walking when she does this more than 3 minutes

- *Short Term Tx Goal:* To increase her ability to perform the above to 30 minutes by the re-exam date within 30 days unless improvement warrants discharge sooner.

- *Long Term Goal:* Attain pre-condition/pre-injury status

- **Primary Treatment:** Diversified, Drop Table and Manual- Chiropractic Manipulative Therapy (CMT) (approx: 36 visits) to the cervical dorsal spinal region, lumbar spinal region, lumbosacral spinal region, sacral spinal region, sacroiliac spinal region, thoraco-lumbar spinal region, thoracic spinal region, pelvic spinal region, left knee, left leg, right foot and right knee at a frequency and duration of 3 visits per week for next 12 weeks followed by a re-exam within 30 days.

- *Tx Effectiveness:* Overall effectiveness of treatment for this complaint will be evaluated by analyzing the Back Bournemouth Questionnaire functional outcome assessment tool. The beginning score or percentage was 74 disability and the goal score or percentage is 10% or better.

Revised Oswestry was 56 % disability.

Lower Extremity Assessment was 71% disability.

- **Traction: Y-Axis mechanical traction** applied to bilateral cervico-thoracic and lumbo-sacral to increase joint mobility during relief phase treatment. For 8 minutes 3 visits per week for next 12 weeks

- **Therapeutic Exercise-Patient consented: Manual stretching** therapeutic exercises performed to the bilateral muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 15 minutes for 2 reps - 2 sets to improve kinesthetic sense, to improve posture and to improve coordination

**Chart Notes**

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

<b>Patient:</b> Blaine, Cindy	<b>DOB:</b> 05/26/1963	
<b>Ins Co</b>	<b>Pol #</b>	<b>Insured</b>

**Date** 07/13/2017

**Provider** Dr. Jacob Young \*\*\* continued from previous page \*\*\*

during therapeutic phase treatment. For 15 minutes at a frequency and duration of 3 visits per week for next 12 weeks

- **Therapeutic Exercise: Whole body vibration** therapeutic exercises were performed to the bilateral muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the upper leg and muscle group of the lower leg region(s) for 5 minutes for 1 reps - 1 sets to improve kinesthetic sense, to improve posture, to improve coordination, to improve proprioception for sitting activities and to improve proprioception for standing activities during therapeutic phase treatment. For 5 minutes at frequency and duration of 3 visits per week for weeks 5-12

- **Therapeutic Exercise: Static weight** assisted Therapeutic Exercises performed to the bilateral muscle group of the upper to mid cervical, muscle group of the mid to lower cervical, muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 8 minutes with 3-6 lbs for 1 reps - 1 sets to improve kinesthetic sense, to improve posture, to improve coordination, to improve proprioception for sitting activities and to improve proprioception for standing activities during therapeutic phase treatment. For 8 minutes at a frequency and duration of 3 visits per week for weeks 5-12

- **Therapeutic Exercise: Resistance band** assisted therapeutic exercises performed to the bilateral muscle group of the upper to mid cervical, muscle group of the mid to lower cervical, muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 10 minutes with medium resistance band for 10-50 reps - 1 sets to improve kinesthetic sense, to improve posture and to improve coordination during therapeutic phase treatment. For 10 minutes at a frequency and duration of 3 visits per week for weeks 9-12

**Today's Treatment:**

- **Chief Complaint:** right anterior pelvis/hip, left anterior pelvis/hip, left anterior thigh, right dorsal foot, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh

- **Primary Treatment:** Diversified, Drop Table and Manual- Chiropractic Manipulative Therapy (CMT) to the C2, C6, T2, T6, T10, L3, L5, sacrum and left pelvis spinal level(s). -- -- --

- **Traction: Y-Axis mechanical traction** applied to cervico-thoracic and lumbo-sacral for 8 minutes. Exercise began at 4:06. Exercise completed at 4:14.

- **Therapeutic Exercise-Patient consented: Manual stretching** Therapeutic Exercises performed as detailed in the initial treatment plan for 15 minutes. Exercise began at 4:14. Therapeutic wobble chair: 25 reps each of side to side, front to back, clockwise rotation, counterclockwise rotations. Cervical extension traction: 20 reps with 20 second hold on final rep-increase by 10 reps each week. Cervical/Lumbar extension traction stretch: 3 minutes. Beginner floor exercises: single knee to chest, both knees to chest, single knee to opposite shoulder, pelvic tilt, pelvic tilt with lift, cat/camel: each performed 2 times for 15-20 second hold. Precor stretchtrainer: lower back, upper back, shoulders, hips/gluteals: each performed 2 times for 15 seconds. Exercise completed at 4:29.

- **Advised**

- *Tx Effect:* Treatment rendered without incident and responding as expected.
- *Next Visit:* continue with treatment plan as scheduled

**Chart Notes**

**Cindy Blaine**

**Black & Gold Chiropractic & Wellness**  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

---

<b>Patient:</b> Blaine, Cindy	<b>DOB:</b> 05/26/1963	
<b>Ins Co</b>	<b>Pol #</b>	<b>Insured</b>

---

**Date** 07/13/2017

**Provider** Dr. Jacob Young

**\*\*\* continued from previous page \*\*\***

**Diagnosis** M54.42: Lumbago w/ sciatica, LT side  
M62.830: Muscle spasm of back  
M99.03: Seg and somatic dysf of lumbar reg  
M99.05: Seg and somatic dysf of pelvic reg  
M99.04: Seg and somatic dysf of sacral reg  
M25.552: Pain in LT hip  
M25.551: Pain in RT hip  
M79.671: Pain in right foot  
M99.06: Seg and somatic dysf of lower extremity  
M40.03: Postural kyphosis, cervicothoracic region  
M54.6: Pain in thoracic spine  
M99.02: Seg and somatic dysf of thoracic reg  
M54.2: Cervicalgia  
M99.01: Seg and somatic dysf of cervical reg

Electronically Signed



Dr. Jacob Young 07/14/2017 08:29 AM

---

## Chart Notes

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

---

Patient: Blaine, Cindy

DOB: 05/26/1963

Ins Co

Pol #

Insured

---

Date 07/14/2017

Provider Dr. Jacob Young

---

### Subjective:

Cindy sought treatment today, complaining of intermittent burning, tightness and throbbing discomfort in the low back. She describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 9 and indicated that the discomfort occurs approximately 80% of the time. She states the discomfort is same since her last visit.

Cindy also complained of continuous burning, shooting and throbbing discomfort in the back of the left hip. She describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 10 and indicated that the discomfort occurs approximately 75% of the time. She states the discomfort is same since her last visit.

Cindy also complained of continuous sharp and throbbing discomfort in the top of the right foot. She describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 10 and indicated that the discomfort occurs approximately 100% of the time. She states the discomfort is same since her last visit.

### Objective:

#### Daily Objective Findings:

- *Spinal Restriction(s)/Subluxation(s)*: C2, C6, T2, T6, T10, L3, L5 and left pelvis
- *Extraspinal Restrictions/Subluxations*: - - - - .
- *Pain/Tenderness*: cervico-thoracic, upper thoracic, lower lumbar, lumbo-sacral, sacral, upper leg and foot
- *Postural Analysis*: short right leg (pelvic deficiency), head forward flexed, head rotation right, high right shoulder, thoracic hyperkyphosis and high left hip.
- *Muscle Spasm(s)*: moderate muscle spasms in the following areas; left anterior pelvis/hip, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh.
- *ROM Concern(s)*: entire lumbar spine and cervical extension was recorded as moderately reduced with pain noted.

### Assessment:

#### ASSESSMENT:

Cindy is of fair health and is expected to make fair progress and recovery with few residuals. She has duration of current episode longer than 1 month, obesity, older age, osteoarthritis, patient compliance, positive radiographic findings and waiting more than 7 days to seek treatment and no noted contraindications to chiropractic care. Based on her history and examination, it is reasonable to believe that her recovery may take longer than an average patient with an uncomplicated case.

**Chart Notes**

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

<b>Patient:</b> Blaine, Cindy	<b>DOB:</b> 05/26/1963	
<b>Ins Co</b>	<b>Pol #</b>	<b>Insured</b>

**Date** 07/14/2017

**Provider** Dr. Jacob Young \*\*\* continued from previous page \*\*\*

**DIAGNOSIS:**

Upon consideration of the information available I have diagnosed Cindy Blaine with: (M54.42) Lumbago w/ sciatica, LT side, (M62.830) Muscle spasm of back, (M99.03) Seg and somatic dysf of lumbar reg, (M99.05) Seg and somatic dysf of pelvic reg, (M99.04) Seg and somatic dysf of sacral reg, (M25.552) Pain in LT hip, (M25.551) Pain in RT hip, (M79.671) Pain in right foot, (M99.06) Seg and somatic dysf of lower extremity, (M40.03) Postural kyphosis, cervicothoracic region, (M54.6) Pain in thoracic spine, (M99.02) Seg and somatic dysf of thoracic reg, (M54.2) Cervicalgia, (M99.01) Seg and somatic dysf of cervical reg

**Daily Assessment:** same, continued same diagnosis and outside referral necessary as indicated in today's subjective.

- *Current Status:* Has stayed the same because she is expected to show improvement long period of Tx and is showing improved function.

**Plan:**

**TREATMENT PLAN:**

Cindy's treatment plan for this episode began on 06/05/2017 and is projected to be completed by 08/28/2017.

- *Home/Self Care:* Cindy was instructed in home care recommendations that included: home cold pack issued today. She was instructed to ice for 20 minutes for pain, repeat after 60 minutes and discontinue after 3 hours

- **Chief Complaint:** right anterior pelvis/hip, left anterior pelvis/hip, right anterior thigh, right dorsal foot, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh

- *Functional Deficit:* Cindy reports employment has become difficult due to some or all of the following: bending over, concentrating, exercising, getting to sleep, performing household chores, lifting objects, looking over shoulder, reaching overhead, rising out of chair or bed, sitting, standing, staying asleep, using a computer and walking when she does this more than 3 minutes

- *Short Term Tx Goal:* To increase her ability to perform the above to 30 minutes by the re-exam date within 30 days unless improvement warrants discharge sooner.

- *Long Term Goal:* Attain pre-condition/pre-injury status

- **Primary Treatment:** Diversified, Drop Table and Manual- Chiropractic Manipulative Therapy (CMT) (approx: 36 visits) to the cervical dorsal spinal region, lumbar spinal region, lumbosacral spinal region, sacral spinal region, sacroiliac spinal region, thoraco-lumbar spinal region, thoracic spinal region, pelvic spinal region, left knee, left leg, right foot and right knee at a frequency and duration of 3 visits per week for next 12 weeks followed by a re-exam within 30 days.

- *Tx Effectiveness:* Overall effectiveness of treatment for this complaint will be evaluated by analyzing the Back Bournemouth Questionnaire functional outcome assessment tool. The beginning score or percentage was 74 disability and the goal score or percentage is 10% or better. Revised Oswestry was 56 % disability.

Lower Extremity Assessment was 71% disability.

- **Traction: Y-Axis mechanical traction** applied to bilateral cervico-thoracic and lumbo-sacral to increase joint mobility during relief phase treatment. For 8 minutes 3 visits per week for next 12 weeks

- **Therapeutic Exercise-Patient consented: Manual stretching** therapeutic exercises performed to the bilateral muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 15 minutes for 2 reps - 2 sets to improve kinesthetic sense, to improve posture and to improve coordination

**Chart Notes**

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

<b>Patient:</b> Blaine, Cindy	<b>DOB:</b> 05/26/1963	
<b>Ins Co</b>	<b>Pol #</b>	<b>Insured</b>

**Date** 07/14/2017

**Provider** Dr. Jacob Young \*\*\* continued from previous page \*\*\*

during therapeutic phase treatment. For 15 minutes at a frequency and duration of 3 visits per week for next 12 weeks

- **Therapeutic Exercise: Whole body vibration** therapeutic exercises were performed to the bilateral muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the upper leg and muscle group of the lower leg region(s) for 5 minutes for 1 reps - 1 sets to improve kinesthetic sense, to improve posture, to improve coordination, to improve proprioception for sitting activities and to improve proprioception for standing activities during therapeutic phase treatment. For 5 minutes at frequency and duration of 3 visits per week for weeks 5-12

- **Therapeutic Exercise: Static weight** assisted Therapeutic Exercises performed to the bilateral muscle group of the upper to mid cervical, muscle group of the mid to lower cervical, muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 8 minutes with 3-6 lbs for 1 reps - 1 sets to improve kinesthetic sense, to improve posture, to improve coordination, to improve proprioception for sitting activities and to improve proprioception for standing activities during therapeutic phase treatment. For 8 minutes at a frequency and duration of 3 visits per week for weeks 5-12

- **Therapeutic Exercise: Resistance band** assisted therapeutic exercises performed to the bilateral muscle group of the upper to mid cervical, muscle group of the mid to lower cervical, muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 10 minutes with medium resistance band for 10-50 reps - 1 sets to improve kinesthetic sense, to improve posture and to improve coordination during therapeutic phase treatment. For 10 minutes at a frequency and duration of 3 visits per week for weeks 9-12

**Today's Treatment:**

- **Chief Complaint:** right anterior pelvis/hip, left anterior pelvis/hip, left anterior thigh, right dorsal foot, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh

- **Primary Treatment:** Diversified, Drop Table and Manual- Chiropractic Manipulative Therapy (CMT) to the C2, C6, T2, T6, T10, L3, L5, sacrum and left pelvis spinal level(s). -- -- --

- **Traction: Y-Axis mechanical traction** applied to cervico-thoracic and lumbo-sacral for 8 minutes. Exercise began at 9:17. Exercise completed at 9:25.

- **Therapeutic Exercise-Patient consented: Manual stretching** Therapeutic Exercises performed as detailed in the initial treatment plan for 15 minutes.

Exercise began at 9:25. Therapeutic wobble chair: 25 reps each of side to side, front to back, clockwise rotation, counterclockwise rotations. Cervical extension traction: 20 reps with 20 second hold on final rep-increase by 10 reps each week. Cervical/Lumbar extension traction stretch: 3 minutes. Beginner floor exercises: single knee to chest, both knees to chest, single knee to opposite shoulder, pelvic tilt, pelvic tilt with lift, cat/camel: each performed 2 times for 15-20 second hold. Precor stretchtrainer: lower back, upper back, shoulders, hips/gluteals: each performed 2 times for 15 seconds. Exercise completed at 9:40.

**- Advised**

- **Tx Effect:** Treatment rendered without incident and responding as expected.

- **Next Visit:** continue with treatment plan as scheduled

**Chart Notes**

**Cindy Blaine**

**Black & Gold Chiropractic & Wellness**  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

---

<b>Patient:</b> Blaine, Cindy	<b>DOB:</b> 05/26/1963	
<b>Ins Co</b>	<b>Pol #</b>	<b>Insured</b>

---

**Date** 07/14/2017

**Provider** Dr. Jacob Young

**\*\*\* continued from previous page \*\*\***

**Diagnosis** M54.42: Lumbago w/ sciatica, LT side  
M62.830: Muscle spasm of back  
M99.03: Seg and somatic dysf of lumbar reg  
M99.05: Seg and somatic dysf of pelvic reg  
M99.04: Seg and somatic dysf of sacral reg  
M25.552: Pain in LT hip  
M25.551: Pain in RT hip  
M79.671: Pain in right foot  
M99.06: Seg and somatic dysf of lower extremity  
M40.03: Postural kyphosis, cervicothoracic region  
M54.6: Pain in thoracic spine  
M99.02: Seg and somatic dysf of thoracic reg  
M54.2: Cervicalgia  
M99.01: Seg and somatic dysf of cervical reg

Electronically Signed



Dr. Jacob Young 07/14/2017 03:53 PM

---

## Chart Notes

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

Patient: Blaine, Cindy

DOB: 05/26/1963

Ins Co

Pol #

Insured

Date 07/17/2017

Provider Dr. Jacob Young

### Subjective:

Cindy sought treatment today, complaining of continuous aching and burning discomfort in the back of the left hip. She describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 7 and indicated that the discomfort occurs approximately 80% of the time. She states the discomfort is same since her last visit.

Cindy also complained of intermittent burning and tightness discomfort in the low back. She describes that the discomfort decreases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 8 and indicated that the discomfort occurs approximately 80% of the time. She states the discomfort is same since her last visit.

Cindy also complained of continuous sharp and aching discomfort in the top of the right foot. She describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 10 and indicated that the discomfort occurs approximately 100% of the time. She states the discomfort is worse since her last visit.

### Objective:

#### Daily Objective Findings:

- *Spinal Restriction(s)/Subluxation(s)*: C2, C6, T2, T6, T10, L3, L5 and left pelvis
  - *Extraspinal Restrictions/Subluxations*: - - - - .
  - *Pain/Tenderness*: cervico-thoracic, upper thoracic, lower lumbar, lumbo-sacral, sacral, upper leg and foot
  - *Postural Analysis*: short right leg (pelvic deficiency), head forward flexed, head rotation right, high right shoulder, thoracic hyperkyphosis and high left hip.
  - *Muscle Spasm(s)*: moderate muscle spasms in the following areas; left anterior pelvis/hip, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh.
  - *ROM Concern(s)*: entire lumbar spine and cervical extension was recorded as moderately reduced with pain noted.
- Functional Movement Screening:  
Core strength: 1/4  
Core flexibility: 0/4

### EXAMINATION:

- Age/Gender/DOB: 54, Female, born 05/26/1963
- Constitutional:** overweight, clean/neat, well-dressed and well-groomed
- Vital Signs:  
Height: 66 Weight: 274 lbs. Pulse: 88 bpm. BP: 125/85, mm/Hg right arm.
  - Appearance: visibly uncomfortable, has difficulty changing positions and walks with a limp
- Ortho-Shoulder Depression** performed. Patient indicated no pain bilaterally.

**Chart Notes**

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

<b>Patient:</b> Blaine, Cindy	<b>DOB:</b> 05/26/1963	
<b>Ins Co</b>	<b>Pol #</b>	<b>Insured</b>

**Date** 07/17/2017

**Provider** Dr. Jacob Young \*\*\* continued from previous page \*\*\*

**Ortho-Distractio**n Test performed, patient indicated relief of segmental level pain .

**Ortho-Cervical Compression** performed. Patient indicated no pain.

**Ortho-Maximum Foramina Compression** performed bilaterally. Patient indicated pain that was moderate on the left at C6/C7 and C7/T1 without radiation.

**Ortho-Jackson Foraminal Compression** performed bilaterally. Patient indicated segmental level pain that was moderate to severe on the right at C6/C7 and C7/T1 without radiation.

**Ortho-Straight Leg Raiser Test** performed bilaterally. Patient indicated severe pain on the bilateral lumbo-sacral joint, sacro-iliac joint, sciatic notch to thigh, thigh to mid-calf and thigh to lower leg at 10 degrees.

**Ortho-Slump's test** performed bilaterally. Patient indicated no pain.**Ortho-Bechterew's test** performed. Patient indicated no pain bilaterally.

**Ortho-Kemp's Test** was performed bilaterally. Patient indicated moderate to severe segmental level pain at left pelvis without radiation.

**Ortho-Double Leg Raiser Test** performed. Patient indicated severe pain on the left and right (equal) lumbo-sacral joint and sacro-iliac joint at 10 degrees.

**Ortho-Ely's Test** performed bilaterally. Patient indicated moderate pain on the left and right (equal) rt knee, lt hip

**Ortho-Nachlas' Test** performed bilaterally. Patient indicated moderate pain on the left and right (equal) sacro-iliac joint and sacro-iliac joint to thigh and rt knee

**Ortho-Yeoman's test** performed bilaterally. Patient indicated increased pain in the S.I. joint that was severe on the left and right (equal).

**Ortho-FABERE/Patrick's Test** was performed bilaterally. Patient complained of moderate to severe pain at the left hip joint and rt knee

**Ortho-Hibb's Test** was performed bilaterally. Patient complained of moderate to severe pain at the left hip joint and rt knee.

**Musculoskeletal**

- *Gait and Station:* normal gait and normal balance

**Musculoskeletal**

- *Inspection/Percussion +/- Palpation:* left anterior pelvis/hip, right anterior knee, right doral foot, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral and left buttock

- *Postural Analysis:* short left leg (pelvic deficiency), head forward flexed, high left shoulder, thoracic hyperkyphosis and high left hip.

- *Spinal Stability/Restriction(s)/Subluxation(s):* C1, C6, T3, T7, T11, L4, sacrum and left pelvis

- *Extraspinal restrictions/subluxations:* N/A (no other subluxations were noted).

- *Muscle Strength and Tone:* moderate to severe muscle spasms in the following areas; left anterior pelvis/hip, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral and left buttock.

**Musculoskeletal - Range of Motion - Cervical - Active**

- Flexion: 50/60 degrees with pain and with stiffness
- Extension: 30/55 degrees with pain and with stiffness
- Left Lat. Flexion: 20/40 degrees with pain and with stiffness
- Right Lat. Flexion: 35/40 degrees with stiffness
- Left Rotation: 45/80 degrees with pain and with stiffness
- Right Rotation: 70/80 degrees with stiffness

**Musculoskeletal - Range of Motion - Thoraco-Lumbar - Active**

- Flexion: 80/90 degrees without pain, stiffness or radiation
- Extension: 10/30 degrees with pain, stiffness and radiation
- Left Lat. Flexion: 20/35 degrees with pain, stiffness and radiation
- Right Lat. Flexion: 35/35 degrees without pain, stiffness or radiation
- Left Rotation: 15/30 degrees with pain, stiffness and radiation

## Chart Notes

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

---

<b>Patient:</b> Blaine, Cindy	<b>DOB:</b> 05/26/1963	
<b>Ins Co</b>	<b>Pol #</b>	<b>Insured</b>
<hr/>		
<b>Date</b> 07/17/2017		
<b>Provider</b> Dr. Jacob Young		<b>*** continued from previous page ***</b>
-Right Rotation:	25/30 degrees without pain, stiffness or radiation	

---

### Assessment:

### ASSESSMENT:

Cindy feels the complaint has improved her ability to OTHER and has changed about 30% since the onset of this complaint/condition. She has been evaluated by analyzing the Low Back Disability Questionnaire (Revised) functional outcome assessment tool with beginning score or percentage of 56 and goal score or percentage of 10% or better. The current overall score or percentage is 60 with an overall change of -7%. In consideration of the findings from today's re-evaluation of Cindy's complaints, the outcome score and my examination findings for this condition, continued treatment is necessary and the new treatment plan will be kept the same and sent for referral.

Cindy is of fair health and is expected to make fair progress and recovery with few residuals. She continues to have obesity, osteoarthritis and positive radiographic findings and no noted as contraindications to chiropractic care, it is reasonable to believe that her recovery may take longer than an average patient with an uncomplicated case.

### DIAGNOSIS:

Upon consideration of the information available the diagnosis has changed to: (M54.42) Lumbago w/ sciatica, LT side, (M62.830) Muscle spasm of back, (M99.03) Seg and somatic dysf of lumbar reg, (M99.05) Seg and somatic dysf of pelvic reg, (M99.04) Seg and somatic dysf of sacral reg, (M25.552) Pain in LT hip, (M25.551) Pain in RT hip, (M79.671) Pain in right foot, (M99.06) Seg and somatic dysf of lower extremity, (M40.03) Postural kyphosis, cervicothoracic region, (M54.6) Pain in thoracic spine, (M99.02) Seg and somatic dysf of thoracic reg, (M54.2) Cervicalgia, (M99.01) Seg and somatic dysf of cervical reg

**Daily Assessment:** showing improvement, meeting expectations and outside referral necessary as indicated in today's subjective.

- *Current Status:* Improving because she is expected to show improvement long period of Tx, is reporting less discomfort and is showing improved function.

### Plan:

### TREATMENT PLAN:

Cindy's treatment plan for this episode began on 06/05/2017 and is projected to be completed by 08/28/2017.

- *Home/Self Care:* Cindy was instructed in home care recommendations that included: home cold pack issued today. She was instructed to ice for 20 minutes for pain, repeat after 60 minutes and discontinue after 3 hours

- **Chief Complaint:** right anterior pelvis/hip, left anterior pelvis/hip, right anterior thigh, right dorsal foot, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh

- *Functional Deficit:* Cindy reports employment has become difficult due to some or all of the following: bending over, concentrating, exercising, getting to sleep, performing household chores, lifting objects, looking over shoulder, reaching overhead, rising out of chair or bed, sitting, standing, staying asleep, using a computer

**Chart Notes**

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

<b>Patient:</b> Blaine, Cindy	<b>DOB:</b> 05/26/1963	
<b>Ins Co</b>	<b>Pol #</b>	<b>Insured</b>

**Date** 07/17/2017

**Provider** Dr. Jacob Young \*\*\* continued from previous page \*\*\*

and walking when she does this more than 3 minutes

- **Short Term Tx Goal:** To increase her ability to perform the above to 30 minutes by the re-exam date within 30 days unless improvement warrants discharge sooner.
- **Long Term Goal:** Attain pre-condition/pre-injury status
- **Primary Treatment:** Diversified, Drop Table and Manual- Chiropractic Manipulative Therapy (CMT) (approx: 36 visits) to the cervical dorsal spinal region, lumbar spinal region, lumbosacral spinal region, sacral spinal region, sacroiliac spinal region, thoraco-lumbar spinal region, thoracic spinal region, pelvic spinal region, left knee, left leg, right foot and right knee at a frequency and duration of 3 visits per week for next 12 weeks followed by a re-exam within 30 days.
- **Tx Effectiveness:** Overall effectiveness of treatment for this complaint will be evaluated by analyzing the Back Bournemouth Questionnaire functional outcome assessment tool. The beginning score or percentage was 74 disability and the goal score or percentage is 10% or better. Revised Oswestry was 56 % disability. Lower Extremity Assessment was 71% disability.
- **Traction: Y-Axis mechanical traction** applied to bilateral cervico-thoracic and lumbo-sacral to increase joint mobility during relief phase treatment. For 8 minutes 3 visits per week for next 12 weeks
- **Therapeutic Exercise-Patient consented: Manual stretching** therapeutic exercises performed to the bilateral muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 15 minutes for 2 reps - 2 sets to improve kinesthetic sense, to improve posture and to improve coordination during therapeutic phase treatment. For 15 minutes at a frequency and duration of 3 visits per week for next 12 weeks
- **Therapeutic Exercise: Whole body vibration** therapeutic exercises were performed to the bilateral muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the upper leg and muscle group of the lower leg region(s) for 5 minutes for 1 reps - 1 sets to improve kinesthetic sense, to improve posture, to improve coordination, to improve proprioception for sitting activities and to improve proprioception for standing activities during therapeutic phase treatment. For 5 minutes at frequency and duration of 3 visits per week for weeks 5-12
- **Therapeutic Exercise: Static weight** assisted Therapeutic Exercises performed to the bilateral muscle group of the upper to mid cervical, muscle group of the mid to lower cervical, muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 8 minutes with 3-6 lbs for 1 reps - 1 sets to improve kinesthetic sense, to improve posture, to improve coordination, to improve proprioception for sitting activities and to improve proprioception for standing activities during therapeutic phase treatment. For 8 minutes at a frequency and duration of 3 visits per week for weeks 5-12
- **Therapeutic Exercise: Resistance band** assisted therapeutic exercises performed to the bilateral muscle group of the upper to mid cervical, muscle group of the mid to lower cervical, muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 10 minutes with medium resistance band for 10-50 reps - 1 sets to improve kinesthetic sense, to improve posture and to improve coordination during therapeutic phase treatment. For 10 minutes at a frequency and duration of 3 visits per week for weeks 9-12

**Today's Treatment:**

- **Chief Complaint:** right anterior pelvis/hip, left anterior pelvis/hip, left anterior thigh, right dorsal foot, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left

**Chart Notes**

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

<b>Patient:</b> Blaine, Cindy	<b>DOB:</b> 05/26/1963	
<b>Ins Co</b>	<b>Pol #</b>	<b>Insured</b>

**Date** 07/17/2017

**Provider** Dr. Jacob Young \*\*\* continued from previous page \*\*\*

sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh

- **Primary Treatment:** Diversified, Drop Table and Manual- Chiropractic Manipulative Therapy (CMT) to the C1, C6, T3, T7, T11, L4, sacrum and left pelvis spinal level(s). -- -- --

- **Traction: Y-Axis mechanical traction** applied to cervico-thoracic and lumbo-sacral for 8 minutes.

Exercise began at 9:35. Exercise completed at 9:43.

- **Therapeutic Exercise-Patient consented: Manual stretching** Therapeutic Exercises performed as detailed in the initial treatment plan for 15 minutes.

Exercise began at 9:43. Therapeutic wobble chair: 25 reps each of side to side, front to back, clockwise rotation, counterclockwise rotations. Cervical extension traction: 20 reps with 20 second hold on final rep-increase by 10 reps each week. Cervical/Lumbar extension traction stretch: 3 minutes. Beginner floor exercises: single knee to chest, both knees to chest, single knee to opposite shoulder, pelvic tilt, pelvic tilt with lift, cat/camel: each performed 2 times for 15-20 second hold. Precor stretchtrainer: lower back, upper back, shoulders, hips/gluteals: each performed 2 times for 15 seconds. Exercise completed at 9:58. Cindy attempted the vibration plate exercises prescribed but quit due to right foot pain. She will re-attempt after her ortho appt for her foot.

**- Advised**

- *Tx Effect:* Treatment rendered without incident and responding as expected.

- *Next Visit:* continue with treatment plan as scheduled

- Diagnosis**
- M54.5: Low back pain
  - M62.830: Muscle spasm of back
  - M99.03: Seg and somatic dysf of lumbar reg
  - M99.05: Seg and somatic dysf of pelvic reg
  - M99.04: Seg and somatic dysf of sacral reg
  - M25.552: Pain in LT hip
  - M79.671: Pain in right foot
  - M99.06: Seg and somatic dysf of lower extremity
  - M40.03: Postural kyphosis, cervicothoracic region
  - M54.6: Pain in thoracic spine
  - M99.02: Seg and somatic dysf of thoracic reg
  - M54.2: Cervicalgia
  - M99.01: Seg and somatic dysf of cervical reg

Electronically Signed



Dr. Jacob Young 08/07/2017 06:40 PM

## Chart Notes

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

---

Patient: Blaine, Cindy

DOB: 05/26/1963

Ins Co

Pol #

Insured

---

Date 07/24/2017

Provider Dr. Jacob Young

---

### Subjective:

Cindy sought treatment today, complaining of intermittent burning discomfort in the back of the left hip. She describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 6 and indicated that the discomfort occurs approximately 70% of the time. She states the discomfort is same since her last visit.

Cindy also complained of continuous tightness discomfort in the low back. She describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 6 and indicated that the discomfort occurs approximately 70% of the time. She states the discomfort is same since her last visit.

Cindy also complained of intermittent tightness discomfort in the front of the left hip. She describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 5 and indicated that the discomfort occurs approximately 70% of the time. She states the discomfort is worse since her last visit.

### Objective:

#### Daily Objective Findings:

- *Spinal Restriction(s)/Subluxation(s)*: C2, C6, T5, T8, T11, L5, sacrum and left pelvis
- *Extraspinial Restrictions/Subluxations*: -- -- -- .
- *Pain/Tenderness*: cervico-thoracic, upper thoracic, lower lumbar, lumbo-sacral, sacral, upper leg and foot
- *Postural Analysis*: short left leg (pelvic deficiency), head forward flexed, head rotation right, high left shoulder, thoracic hyperkyphosis and high left hip.
- *Muscle Spasm(s)*: moderate muscle spasms in the following areas; left anterior pelvis/hip, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh.
- *ROM Concern(s)*: entire lumbar spine and cervical extension was recorded as moderately reduced with pain noted.

### Assessment:

#### ASSESSMENT:

Cindy feels the complaint has improved her ability to OTHER and has changed about 30% since the onset of this complaint/condition. She has been evaluated by analyzing the Low Back Disability Questionnaire (Revised) functional outcome assessment tool with beginning score or percentage of 56 and goal score or percentage of 10% or better. The current overall score or percentage is 60 with an overall change of -7%. In consideration of the findings from today's re-evaluation of Cindy's complaints, the outcome score and my examination findings for this condition, continued treatment is necessary and the new treatment plan will be kept the same and sent for referral.

**Chart Notes**

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

<b>Patient:</b> Blaine, Cindy	<b>DOB:</b> 05/26/1963	
<b>Ins Co</b>	<b>Pol #</b>	<b>Insured</b>

**Date** 07/24/2017

**Provider** Dr. Jacob Young \*\*\* continued from previous page \*\*\*

Cindy is of fair health and is expected to make fair progress and recovery with few residuals. She continues to have obesity, osteoarthritis and positive radiographic findings and no noted as contraindications to chiropractic care, it is reasonable to believe that her recovery may take longer than an average patient with an uncomplicated case.

**DIAGNOSIS:**

Upon consideration of the information available the diagnosis has changed to: (M54.42) Lumbago w/ sciatica, LT side, (M62.830) Muscle spasm of back, (M99.03) Seg and somatic dysf of lumbar reg, (M99.05) Seg and somatic dysf of pelvic reg, (M99.04) Seg and somatic dysf of sacral reg, (M25.552) Pain in LT hip, (M25.551) Pain in RT hip, (M79.671) Pain in right foot, (M99.06) Seg and somatic dysf of lower extremity, (M40.03) Postural kyphosis, cervicothoracic region, (M54.6) Pain in thoracic spine, (M99.02) Seg and somatic dysf of thoracic reg, (M54.2) Cervicalgia, (M99.01) Seg and somatic dysf of cervical reg

**Daily Assessment:** showing improvement, meeting expectations and outside referral necessary as indicated in today's subjective.

- *Current Status:* Improving because she is expected to show improvement long period of Tx, is reporting less discomfort and is showing improved function.

**Plan:**

**TREATMENT PLAN:**

Cindy's treatment plan for this episode began on 06/05/2017 and is projected to be completed by 08/28/2017.

- *Home/Self Care:* Cindy was instructed in home care recommendations that included: home cold pack issued today. She was instructed to ice for 20 minutes for pain, repeat after 60 minutes and discontinue after 3 hours

- **Chief Complaint:** right anterior pelvis/hip, left anterior pelvis/hip, right anterior thigh, right dorsal foot, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh

- *Functional Deficit:* Cindy reports employment has become difficult due to some or all of the following: bending over, concentrating, exercising, getting to sleep, performing household chores, lifting objects, looking over shoulder, reaching overhead, rising out of chair or bed, sitting, standing, staying asleep, using a computer and walking when she does this more than 3 minutes

- *Short Term Tx Goal:* To increase her ability to perform the above to 30 minutes by the re-exam date within 30 days unless improvement warrants discharge sooner.

- *Long Term Goal:* Attain pre-condition/pre-injury status

- **Primary Treatment:** Diversified, Drop Table and Manual- Chiropractic Manipulative Therapy (CMT) (approx: 36 visits) to the cervical dorsal spinal region, lumbar spinal region, lumbosacral spinal region, sacral spinal region, sacroiliac spinal region, thoraco-lumbar spinal region, thoracic spinal region, pelvic spinal region, left knee, left leg, right foot and right knee at a frequency and duration of 3 visits per week for next 12 weeks followed by a re-exam within 30 days.

- *Tx Effectiveness:* Overall effectiveness of treatment for this complaint will be evaluated by analyzing the Back Bournemouth Questionnaire functional outcome assessment tool. The beginning score or percentage was 74 disability and the goal score or percentage is 10% or better.

Revised Oswestry was 56 % disability.

Lower Extremity Assessment was 71% disability.

- **Traction: Y-Axis mechanical traction** applied to bilateral cervico-thoracic and lumbo-sacral to increase joint mobility during relief phase treatment. For 8 minutes 3 visits per week for next 12 weeks

## Chart Notes

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

Patient: Blaine, Cindy

DOB: 05/26/1963

Ins Co

Pol #

Insured

Date 07/24/2017

Provider Dr. Jacob Young

\*\*\* continued from previous page \*\*\*

- **Therapeutic Exercise-Patient consented: Manual stretching** therapeutic exercises performed to the bilateral muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 15 minutes for 2 reps - 2 sets to improve kinesthetic sense, to improve posture and to improve coordination during therapeutic phase treatment. For 15 minutes at a frequency and duration of 3 visits per week for next 12 weeks

- **Therapeutic Exercise: Whole body vibration** therapeutic exercises were performed to the bilateral muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the upper leg and muscle group of the lower leg region(s) for 5 minutes for 1 reps - 1 sets to improve kinesthetic sense, to improve posture, to improve coordination, to improve proprioception for sitting activities and to improve proprioception for standing activities during therapeutic phase treatment. For 5 minutes at frequency and duration of 3 visits per week for weeks 5-12

- **Therapeutic Exercise: Static weight** assisted Therapeutic Exercises performed to the bilateral muscle group of the upper to mid cervical, muscle group of the mid to lower cervical, muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 8 minutes with 3-6 lbs for 1 reps - 1 sets to improve kinesthetic sense, to improve posture, to improve coordination, to improve proprioception for sitting activities and to improve proprioception for standing activities during therapeutic phase treatment. For 8 minutes at a frequency and duration of 3 visits per week for weeks 5-12

- **Therapeutic Exercise: Resistance band** assisted therapeutic exercises performed to the bilateral muscle group of the upper to mid cervical, muscle group of the mid to lower cervical, muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 10 minutes with medium resistance band for 10-50 reps - 1 sets to improve kinesthetic sense, to improve posture and to improve coordination during therapeutic phase treatment. For 10 minutes at a frequency and duration of 3 visits per week for weeks 9-12

### Today's Treatment:

- **Chief Complaint:** right anterior pelvis/hip, left anterior pelvis/hip, left anterior thigh, right dorsal foot, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh

- **Primary Treatment:** Diversified, Drop Table and Manual- Chiropractic Manipulative Therapy (CMT) to the C2, C6, T5, T8, T11, L5, sacrum and left pelvis spinal level(s). -- -- --

- **Traction: Y-Axis mechanical traction** applied to cervico-thoracic and lumbo-sacral for 8 minutes. Exercise began at 11:40. Exercise completed at 11:48.

- **Therapeutic Exercise-Patient consented: Manual stretching** Therapeutic Exercises performed as detailed in the initial treatment plan for 15 minutes.

Exercise began at 11:48. Therapeutic wobble chair: 25 reps each of side to side, front to back, clockwise rotation, counterclockwise rotations. Cervical extension traction: 20 reps with 20 second hold on final rep-increase by 10 reps each week. Cervical/Lumbar extension traction stretch: 3 minutes. Beginner floor exercises: single knee to chest, both knees to chest, single knee to opposite shoulder, pelvic tilt, pelvic tilt with lift, cat/camel: each performed 2 times for 15-20 second hold. Precor stretchtrainer: lower back, upper back, shoulders, hips/gluteals: each performed 2 times for 15 seconds. Exercise completed at 12:03.

### - Advised

- **Tx Effect:** Treatment rendered without incident and responding as expected.

**Chart Notes**

**Cindy Blaine**

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

---

<b>Patient:</b> Blaine, Cindy	<b>DOB:</b> 05/26/1963	
<b>Ins Co</b>	<b>Pol #</b>	<b>Insured</b>

---

**Date** 07/24/2017

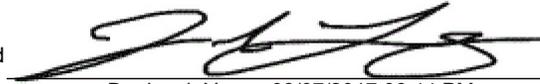
**Provider** Dr. Jacob Young

**\*\*\* continued from previous page \*\*\***

- *Next Visit:* continue with treatment plan as scheduled

- Diagnosis**
- M54.5: Low back pain
  - M62.830: Muscle spasm of back
  - M99.03: Seg and somatic dysf of lumbar reg
  - M99.05: Seg and somatic dysf of pelvic reg
  - M99.04: Seg and somatic dysf of sacral reg
  - M25.552: Pain in LT hip
  - M79.671: Pain in right foot
  - M99.06: Seg and somatic dysf of lower extremity
  - M40.03: Postural kyphosis, cervicothoracic region
  - M54.6: Pain in thoracic spine
  - M99.02: Seg and somatic dysf of thoracic reg
  - M54.2: Cervicalgia
  - M99.01: Seg and somatic dysf of cervical reg

Electronically Signed



Dr. Jacob Young 08/07/2017 06:44 PM

---

## Chart Notes

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

Patient: Blaine, Cindy

DOB: 05/26/1963

Ins Co

Pol #

Insured

Date 08/01/2017

Provider Dr. Jacob Young

### Subjective:

Cindy sought treatment today, complaining of frequent tightness discomfort in the low back. She describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 6 and indicated that the discomfort occurs approximately 60% of the time. She states the discomfort is better since her last visit.

Cindy also complained of frequent burning discomfort in the back of the left hip. She describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 8 and indicated that the discomfort occurs approximately 70% of the time. She states the discomfort is better since her last visit.

### Objective:

#### Daily Objective Findings:

- *Spinal Restriction(s)/Subluxation(s)*: C2, C6, T5, T8, T11, L5, sacrum and left pelvis
- *Extraspinal Restrictions/Subluxations*: -- -- -- .
- *Pain/Tenderness*: cervico-thoracic, upper thoracic, lower lumbar, lumbo-sacral, sacral, upper leg and foot
- *Postural Analysis*: short left leg (pelvic deficiency), head forward flexed, head rotation right, high left shoulder, thoracic hyperkyphosis and high left hip.
- *Muscle Spasm(s)*: moderate muscle spasms in the following areas; left anterior pelvis/hip, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh.
- *ROM Concern(s)*: entire lumbar spine and cervical extension was recorded as moderately reduced with pain noted.

### Assessment:

#### ASSESSMENT:

Cindy feels the complaint has improved her ability to OTHER and has changed about 30% since the onset of this complaint/condition. She has been evaluated by analyzing the Low Back Disability Questionnaire (Revised) functional outcome assessment tool with beginning score or percentage of 56 and goal score or percentage of 10% or better. The current overall score or percentage is 60 with an overall change of -7%. In consideration of the findings from today's re-evaluation of Cindy's complaints, the outcome score and my examination findings for this condition, continued treatment is necessary and the new treatment plan will be kept the same and sent for referral.

Cindy is of fair health and is expected to make fair progress and recovery with few residuals. She continues to have obesity, osteoarthritis and positive radiographic findings and no noted as contraindications to chiropractic care, it is reasonable to believe that her recovery may take longer than an average patient with an uncomplicated case.

### DIAGNOSIS:

## Chart Notes

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

Patient: Blaine, Cindy

DOB: 05/26/1963

Ins Co

Pol #

Insured

Date 08/01/2017

Provider Dr. Jacob Young

\*\*\* continued from previous page \*\*\*

Upon consideration of the information available the diagnosis has changed to: (M54.42) Lumbago w/ sciatica, LT side, (M62.830) Muscle spasm of back, (M99.03) Seg and somatic dysf of lumbar reg, (M99.05) Seg and somatic dysf of pelvic reg, (M99.04) Seg and somatic dysf of sacral reg, (M25.552) Pain in LT hip, (M25.551) Pain in RT hip, (M79.671) Pain in right foot, (M99.06) Seg and somatic dysf of lower extremity, (M40.03) Postural kyphosis, cervicothoracic region, (M54.6) Pain in thoracic spine, (M99.02) Seg and somatic dysf of thoracic reg, (M54.2) Cervicalgia, (M99.01) Seg and somatic dysf of cervical reg

**Daily Assessment:** showing improvement, meeting expectations and outside referral necessary as indicated in today's subjective.

- *Current Status:* Improving because she is expected to show improvement long period of Tx, is reporting less discomfort and is showing improved function.

### Plan:

### TREATMENT PLAN:

Cindy's treatment plan for this episode began on 06/05/2017 and is projected to be completed by 08/28/2017.

- *Home/Self Care:* Cindy was instructed in home care recommendations that included: home cold pack issued today. She was instructed to ice for 20 minutes for pain, repeat after 60 minutes and discontinue after 3 hours

- **Chief Complaint:** right anterior pelvis/hip, left anterior pelvis/hip, right anterior thigh, right dorsal foot, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh

- *Functional Deficit:* Cindy reports employment has become difficult due to some or all of the following: bending over, concentrating, exercising, getting to sleep, performing household chores, lifting objects, looking over shoulder, reaching overhead, rising out of chair or bed, sitting, standing, staying asleep, using a computer and walking when she does this more than 3 minutes

- *Short Term Tx Goal:* To increase her ability to perform the above to 30 minutes by the re-exam date within 30 days unless improvement warrants discharge sooner.

- *Long Term Goal:* Attain pre-condition/pre-injury status

- **Primary Treatment:** Diversified, Drop Table and Manual- Chiropractic Manipulative Therapy (CMT) (approx: 36 visits) to the cervical dorsal spinal region, lumbar spinal region, lumbosacral spinal region, sacral spinal region, sacroiliac spinal region, thoraco-lumbar spinal region, thoracic spinal region, pelvic spinal region, left knee, left leg, right foot and right knee at a frequency and duration of 3 visits per week for next 12 weeks followed by a re-exam within 30 days.

- *Tx Effectiveness:* Overall effectiveness of treatment for this complaint will be evaluated by analyzing the Back Bournemouth Questionnaire functional outcome assessment tool. The beginning score or percentage was 74 disability and the goal score or percentage is 10% or better.

Revised Oswestry was 56 % disability.

Lower Extremity Assessment was 71% disability.

- **Traction: Y-Axis mechanical traction** applied to bilateral cervico-thoracic and lumbo-sacral to increase joint mobility during relief phase treatment. For 8 minutes 3 visits per week for next 12 weeks

- **Therapeutic Exercise-Patient consented: Manual stretching** therapeutic exercises performed to the bilateral muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 15 minutes for 2 reps - 2 sets to improve kinesthetic sense, to improve posture and to improve coordination during therapeutic phase treatment. For 15 minutes at a frequency and duration of 3 visits per week for next 12

**Chart Notes**

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

<b>Patient:</b> Blaine, Cindy	<b>DOB:</b> 05/26/1963	
<b>Ins Co</b>	<b>Pol #</b>	<b>Insured</b>

**Date** 08/01/2017

**Provider** Dr. Jacob Young \*\*\* continued from previous page \*\*\*

weeks

- **Therapeutic Exercise: Whole body vibration** therapeutic exercises were performed to the bilateral muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the upper leg and muscle group of the lower leg region(s) for 5 minutes for 1 reps - 1 sets to improve kinesthetic sense, to improve posture, to improve coordination, to improve proprioception for sitting activities and to improve proprioception for standing activities during therapeutic phase treatment. For 5 minutes at frequency and duration of 3 visits per week for weeks 5-12

- **Therapeutic Exercise: Static weight** assisted Therapeutic Exercises performed to the bilateral muscle group of the upper to mid cervical, muscle group of the mid to lower cervical, muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 8 minutes with 3-6 lbs for 1 reps - 1 sets to improve kinesthetic sense, to improve posture, to improve coordination, to improve proprioception for sitting activities and to improve proprioception for standing activities during therapeutic phase treatment. For 8 minutes at a frequency and duration of 3 visits per week for weeks 5-12

- **Therapeutic Exercise: Resistance band** assisted therapeutic exercises performed to the bilateral muscle group of the upper to mid cervical, muscle group of the mid to lower cervical, muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 10 minutes with medium resistance band for 10-50 reps - 1 sets to improve kinesthetic sense, to improve posture and to improve coordination during therapeutic phase treatment. For 10 minutes at a frequency and duration of 3 visits per week for weeks 9-12

**Today's Treatment:**

- **Chief Complaint:** right anterior pelvis/hip, left anterior pelvis/hip, left anterior thigh, right dorsal foot, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh

- **Primary Treatment:** Diversified, Drop Table and Manual- Chiropractic Manipulative Therapy (CMT) to the C2, C6, T5, T8, T11, L5, sacrum and left pelvis spinal level(s). -- -- --

- **Traction: Y-Axis mechanical traction** applied to cervico-thoracic and lumbo-sacral for 8 minutes. Exercise began at 2:12. Exercise completed at 2:20.

- **Therapeutic Exercise-Patient consented: Manual stretching** Therapeutic Exercises performed as detailed in the initial treatment plan for 15 minutes.

Exercise began at 2:20. Therapeutic wobble chair: 25 reps each of side to side, front to back, clockwise rotation, counterclockwise rotations. Cervical extension traction: 20 reps with 20 second hold on final rep-increase by 10 reps each week. Cervical/Lumbar extension traction stretch: 3 minutes. Beginner floor exercises: single knee to chest, both knees to chest, single knee to opposite shoulder, pelvic tilt, pelvic tilt with lift, cat/camel: each performed 2 times for 15-20 second hold. Precor stretchtrainer: lower back, upper back, shoulders, hips/gluteals: each performed 2 times for 15 seconds. Exercise completed at 2:35.

**- Advised**

- **Tx Effect:** Treatment rendered without incident and responding as expected.

- **Next Visit:** continue with treatment plan as scheduled

**Chart Notes**

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

---

<b>Patient:</b> Blaine, Cindy	<b>DOB:</b> 05/26/1963	
<b>Ins Co</b>	<b>Pol #</b>	<b>Insured</b>

---

**Date** 08/01/2017

**Provider** Dr. Jacob Young

**\*\*\* continued from previous page \*\*\***

**Diagnosis** M54.5: Low back pain  
M62.830: Muscle spasm of back  
M99.03: Seg and somatic dysf of lumbar reg  
M99.05: Seg and somatic dysf of pelvic reg  
M99.04: Seg and somatic dysf of sacral reg  
M25.552: Pain in LT hip  
M79.671: Pain in right foot  
M99.06: Seg and somatic dysf of lower extremity  
M40.03: Postural kyphosis, cervicothoracic region  
M54.6: Pain in thoracic spine  
M99.02: Seg and somatic dysf of thoracic reg  
M54.2: Cervicalgia  
M99.01: Seg and somatic dysf of cervical reg

Electronically Signed



Dr. Jacob Young 08/07/2017 06:47 PM

---

## Chart Notes

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

---

Patient: Blaine, Cindy

DOB: 05/26/1963

Ins Co

Pol #

Insured

---

Date 08/02/2017

Provider Dr. Jacob Young

---

### Subjective:

Cindy sought treatment today, complaining of frequent aching and tightness discomfort in the low back. She describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 7 and indicated that the discomfort occurs approximately 50% of the time. She states the discomfort is better since her last visit.

Cindy also complained of frequent burning and tightness discomfort in the back of the left hip. She describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 6 and indicated that the discomfort occurs approximately 50% of the time. She states the discomfort is better since her last visit.

Cindy also complained of frequent sharp and aching discomfort in the top of the left foot. She describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 8 and indicated that the discomfort occurs approximately 70% of the time. She states the discomfort is better since her last visit.

### Objective:

#### Daily Objective Findings:

- *Spinal Restriction(s)/Subluxation(s)*: C2, C6, T1, T5, T8, L2, sacrum and left pelvis
- *Extraspinal Restrictions/Subluxations*: - - - - .
- *Pain/Tenderness*: cervico-thoracic, upper thoracic, lower lumbar, lumbo-sacral, sacral, upper leg and foot
- *Postural Analysis*: short left leg (pelvic deficiency), head forward flexed, head rotation right, high left shoulder, thoracic hyperkyphosis and high left hip.
- *Muscle Spasm(s)*: moderate muscle spasms in the following areas; left anterior pelvis/hip, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh.
- *ROM Concern(s)*: entire lumbar spine and cervical extension was recorded as moderately reduced with pain noted.

### Assessment:

#### ASSESSMENT:

Cindy feels the complaint has improved her ability to OTHER and has changed about 30% since the onset of this complaint/condition. She has been evaluated by analyzing the Low Back Disability Questionnaire (Revised) functional outcome assessment tool with beginning score or percentage of 56 and goal score or percentage of 10% or better. The current overall score or percentage is 60 with an overall change of -7%. In consideration of the findings from today's re-evaluation of Cindy's complaints, the outcome score and my examination findings for this condition, continued treatment is necessary and the new treatment plan will be kept the same and sent for referral.

**Chart Notes**

**Cindy Blaine**

**Black & Gold Chiropractic & Wellness**  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

<b>Patient:</b> Blaine, Cindy	<b>DOB:</b> 05/26/1963	
<b>Ins Co</b>	<b>Pol #</b>	<b>Insured</b>
<b>Date</b> 08/02/2017		
<b>Provider</b> Dr. Jacob Young		<b>*** continued from previous page ***</b>

Cindy is of fair health and is expected to make fair progress and recovery with few residuals. She continues to have obesity, osteoarthritis and positive radiographic findings and no noted as contraindications to chiropractic care, it is reasonable to believe that her recovery may take longer than an average patient with an uncomplicated case.

**DIAGNOSIS:**

Upon consideration of the information available the diagnosis has changed to: (M54.42) Lumbago w/ sciatica, LT side, (M62.830) Muscle spasm of back, (M99.03) Seg and somatic dysf of lumbar reg, (M99.05) Seg and somatic dysf of pelvic reg, (M99.04) Seg and somatic dysf of sacral reg, (M25.552) Pain in LT hip, (M25.551) Pain in RT hip, (M79.671) Pain in right foot, (M99.06) Seg and somatic dysf of lower extremity, (M40.03) Postural kyphosis, cervicothoracic region, (M54.6) Pain in thoracic spine, (M99.02) Seg and somatic dysf of thoracic reg, (M54.2) Cervicalgia, (M99.01) Seg and somatic dysf of cervical reg

**Daily Assessment:** showing improvement and meeting expectations as indicated in today's subjective.

- *Current Status:* Improving because she is expected to show improvement long period of Tx, is reporting less discomfort and is showing improved function.

**Plan:**

**TREATMENT PLAN:**

Cindy's treatment plan for this episode began on 06/05/2017 and is projected to be completed by 08/28/2017.

- *Home/Self Care:* Cindy was instructed in home care recommendations that included: home cold pack issued today. She was instructed to ice for 20 minutes for pain, repeat after 60 minutes and discontinue after 3 hours

- **Chief Complaint:** right anterior pelvis/hip, left anterior pelvis/hip, right anterior thigh, right doral foot, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh

- *Functional Deficit:* Cindy reports employment has become difficult due to some or all of the following: bending over, concentrating, exercising, getting to sleep, performing household chores, lifting objects, looking over shoulder, reaching overhead, rising out of chair or bed, sitting, standing, staying asleep, using a computer and walking when she does this more than 3 minutes

- *Short Term Tx Goal:* To increase her ability to perform the above to 30 minutes by the re-exam date within 30 days unless improvement warrants discharge sooner.

- *Long Term Goal:* Attain pre-condition/pre-injury status

- **Primary Treatment:** Diversified, Drop Table and Manual- Chiropractic Manipulative Therapy (CMT) (approx: 36 visits) to the cervical dorsal spinal region, lumbar spinal region, lumbosacral spinal region, sacral spinal region, sacroiliac spinal region, thoraco-lumbar spinal region, thoracic spinal region, pelvic spinal region, left knee, left leg, right foot and right knee at a frequency and duration of 3 visits per week for next 12 weeks followed by a re-exam within 30 days.

- *Tx Effectiveness:* Overall effectiveness of treatment for this complaint will be evaluated by analyzing the Back Bournemouth Questionnaire functional outcome assessment tool. The beginning score or percentage was 74 disability and the goal score or percentage is 10% or better.

Revised Oswestry was 56 % disability.

Lower Extremity Assessment was 71% disability.

- **Traction: Y-Axis mechanical traction** applied to bilateral cervico-thoracic and lumbo-sacral to increase joint mobility during relief phase treatment. For 8 minutes 3 visits per week for next 12 weeks

## Chart Notes

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

---

<b>Patient:</b> Blaine, Cindy	<b>DOB:</b> 05/26/1963	
<b>Ins Co</b>	<b>Pol #</b>	<b>Insured</b>
<hr/>		
<b>Date</b> 08/02/2017		
<b>Provider</b> Dr. Jacob Young		<b>*** continued from previous page ***</b>

---

- **Therapeutic Exercise-Patient consented: Manual stretching** therapeutic exercises performed to the bilateral muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 15 minutes for 2 reps - 2 sets to improve kinesthetic sense, to improve posture and to improve coordination during therapeutic phase treatment. For 15 minutes at a frequency and duration of 3 visits per week for next 12 weeks

- **Therapeutic Exercise: Whole body vibration** therapeutic exercises were performed to the bilateral muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the upper leg and muscle group of the lower leg region(s) for 5 minutes for 1 reps - 1 sets to improve kinesthetic sense, to improve posture, to improve coordination, to improve proprioception for sitting activities and to improve proprioception for standing activities during therapeutic phase treatment. For 5 minutes at frequency and duration of 3 visits per week for weeks 5-12

- **Therapeutic Exercise: Static weight** assisted Therapeutic Exercises performed to the bilateral muscle group of the upper to mid cervical, muscle group of the mid to lower cervical, muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 8 minutes with 3-6 lbs for 1 reps - 1 sets to improve kinesthetic sense, to improve posture, to improve coordination, to improve proprioception for sitting activities and to improve proprioception for standing activities during therapeutic phase treatment. For 8 minutes at a frequency and duration of 3 visits per week for weeks 5-12

- **Therapeutic Exercise: Resistance band** assisted therapeutic exercises performed to the bilateral muscle group of the upper to mid cervical, muscle group of the mid to lower cervical, muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 10 minutes with medium resistance band for 10-50 reps - 1 sets to improve kinesthetic sense, to improve posture and to improve coordination during therapeutic phase treatment. For 10 minutes at a frequency and duration of 3 visits per week for weeks 9-12

### Today's Treatment:

- **Chief Complaint:** right anterior pelvis/hip, left anterior pelvis/hip, left anterior thigh, right dorsal foot, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh

- **Primary Treatment:** Diversified, Drop Table and Manual- Chiropractic Manipulative Therapy (CMT) to the C2, C6, T1, T5, T8, L2, sacrum and left pelvis spinal level(s). -- -- --

- **Traction: Y-Axis mechanical traction** applied to cervico-thoracic and lumbo-sacral for 8 minutes. Exercise began at 4:08. Exercise completed at 4:16.

- **Therapeutic Exercise-Patient consented: Manual stretching** Therapeutic Exercises performed as detailed in the initial treatment plan for 15 minutes.

Exercise began at 4:16. Therapeutic wobble chair: 25 reps each of side to side, front to back, clockwise rotation, counterclockwise rotations. Cervical extension traction: 20 reps with 20 second hold on final rep-increase by 10 reps each week. Cervical/Lumbar extension traction stretch: 3 minutes. Beginner floor exercises: single knee to chest, both knees to chest, single knee to opposite shoulder, pelvic tilt, pelvic tilt with lift, cat/camel: each performed 2 times for 15-20 second hold. Precor stretchtrainer: lower back, upper back, shoulders, hips/gluteals: each performed 2 times for 15 seconds. Exercise completed at 4:31.

### - Advised

- **Tx Effect:** Treatment rendered without incident and responding as expected.

**Chart Notes**

**Cindy Blaine**

**Black & Gold Chiropractic & Wellness**  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

---

<b>Patient:</b> Blaine, Cindy	<b>DOB:</b> 05/26/1963	
<b>Ins Co</b>	<b>Pol #</b>	<b>Insured</b>

---

**Date** 08/02/2017

**Provider** Dr. Jacob Young

**\*\*\* continued from previous page \*\*\***

- *Next Visit:* continue with treatment plan as scheduled

- Diagnosis**
- M54.5: Low back pain
  - M62.830: Muscle spasm of back
  - M99.03: Seg and somatic dysf of lumbar reg
  - M99.05: Seg and somatic dysf of pelvic reg
  - M99.04: Seg and somatic dysf of sacral reg
  - M25.552: Pain in LT hip
  - M79.671: Pain in right foot
  - M99.06: Seg and somatic dysf of lower extremity
  - M40.03: Postural kyphosis, cervicothoracic region
  - M54.6: Pain in thoracic spine
  - M99.02: Seg and somatic dysf of thoracic reg
  - M54.2: Cervicalgia
  - M99.01: Seg and somatic dysf of cervical reg

Electronically Signed



Dr. Jacob Young 08/07/2017 06:56 PM

---

## Chart Notes

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

Patient: Blaine, Cindy

DOB: 05/26/1963

Ins Co

Pol #

Insured

Date 08/03/2017

Provider Dr. Jacob Young

### Subjective:

Cindy sought treatment today, complaining of occasional tightness discomfort in the low back. She describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 5 and indicated that the discomfort occurs approximately 40% of the time. She states the discomfort is better since her last visit.

Cindy also complained of frequent burning and throbbing discomfort in the back of the left hip. She describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 7 and indicated that the discomfort occurs approximately 60% of the time. She states the discomfort is better since her last visit.

Cindy also complained of frequent sharp discomfort in the top of the right foot. She describes that the discomfort increases with movement. On a scale of 1 to 10, with 10 being the most severe, she, using a VAS, describes the intensity as a 8 and indicated that the discomfort occurs approximately 50% of the time. She states the discomfort is better since her last visit.

### Objective:

#### Daily Objective Findings:

- *Spinal Restriction(s)/Subluxation(s)*: C2, C6, T5, T8, T11, L5, sacrum and left pelvis
- *Extraspinial Restrictions/Subluxations*: -- -- -- .
- *Pain/Tenderness*: cervico-thoracic, upper thoracic, lower lumbar, lumbo-sacral, sacral, upper leg and foot
- *Postural Analysis*: short left leg (pelvic deficiency), head forward flexed, head rotation right, high left shoulder, thoracic hyperkyphosis and high left hip.
- *Muscle Spasm(s)*: moderate muscle spasms in the following areas; left anterior pelvis/hip, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh.
- *ROM Concern(s)*: entire lumbar spine and cervical extension was recorded as moderately reduced with pain noted.

### Assessment:

#### ASSESSMENT:

Cindy feels the complaint has improved her ability to OTHER and has changed about 30% since the onset of this complaint/condition. She has been evaluated by analyzing the Low Back Disability Questionnaire (Revised) functional outcome assessment tool with beginning score or percentage of 56 and goal score or percentage of 10% or better. The current overall score or percentage is 60 with an overall change of -7%. In consideration of the findings from today's re-evaluation of Cindy's complaints, the outcome score and my examination findings for this condition, continued treatment is necessary and the new treatment plan will be kept the same and sent for referral.

## Chart Notes

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

Patient: Blaine, Cindy

DOB: 05/26/1963

Ins Co

Pol #

Insured

Date 08/03/2017

Provider Dr. Jacob Young

\*\*\* continued from previous page \*\*\*

Cindy is of fair health and is expected to make fair progress and recovery with few residuals. She continues to have obesity, osteoarthritis and positive radiographic findings and no noted as contraindications to chiropractic care, it is reasonable to believe that her recovery may take longer than an average patient with an uncomplicated case.

### DIAGNOSIS:

Upon consideration of the information available the diagnosis has changed to: (M54.42) Lumbago w/ sciatica, LT side, (M62.830) Muscle spasm of back, (M99.03) Seg and somatic dysf of lumbar reg, (M99.05) Seg and somatic dysf of pelvic reg, (M99.04) Seg and somatic dysf of sacral reg, (M25.552) Pain in LT hip, (M25.551) Pain in RT hip, (M79.671) Pain in right foot, (M99.06) Seg and somatic dysf of lower extremity, (M40.03) Postural kyphosis, cervicothoracic region, (M54.6) Pain in thoracic spine, (M99.02) Seg and somatic dysf of thoracic reg, (M54.2) Cervicalgia, (M99.01) Seg and somatic dysf of cervical reg

**Daily Assessment:** showing improvement and meeting expectations as indicated in today's subjective.

- *Current Status:* Improving because she is expected to show improvement long period of Tx, is reporting less discomfort and is showing improved function.

### Plan:

### TREATMENT PLAN:

Cindy's treatment plan for this episode began on 06/05/2017 and is projected to be completed by 08/28/2017.

- *Home/Self Care:* Cindy was instructed in home care recommendations that included: home cold pack issued today. She was instructed to ice for 20 minutes for pain, repeat after 60 minutes and discontinue after 3 hours

- **Chief Complaint:** right anterior pelvis/hip, left anterior pelvis/hip, right anterior thigh, right dorsal foot, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh

- *Functional Deficit:* Cindy reports employment has become difficult due to some or all of the following: bending over, concentrating, exercising, getting to sleep, performing household chores, lifting objects, looking over shoulder, reaching overhead, rising out of chair or bed, sitting, standing, staying asleep, using a computer and walking when she does this more than 3 minutes

- *Short Term Tx Goal:* To increase her ability to perform the above to 30 minutes by the re-exam date within 30 days unless improvement warrants discharge sooner.

- *Long Term Goal:* Attain pre-condition/pre-injury status

- **Primary Treatment:** Diversified, Drop Table and Manual- Chiropractic Manipulative Therapy (CMT) (approx: 36 visits) to the cervical dorsal spinal region, lumbar spinal region, lumbosacral spinal region, sacral spinal region, sacroiliac spinal region, thoraco-lumbar spinal region, thoracic spinal region, pelvic spinal region, left knee, left leg, right foot and right knee at a frequency and duration of 3 visits per week for next 12 weeks followed by a re-exam within 30 days.

- *Tx Effectiveness:* Overall effectiveness of treatment for this complaint will be evaluated by analyzing the Back Bournemouth Questionnaire functional outcome assessment tool. The beginning score or percentage was 74 disability and the goal score or percentage is 10% or better.

Revised Oswestry was 56 % disability.

Lower Extremity Assessment was 71% disability.

- **Traction: Y-Axis mechanical traction** applied to bilateral cervico-thoracic and lumbo-sacral to increase joint mobility during relief phase treatment. For 8 minutes 3 visits per week for next 12 weeks

- **Therapeutic Exercise-Patient consented: Manual stretching** therapeutic exercises performed to the

## Chart Notes

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

---

<b>Patient:</b> Blaine, Cindy	<b>DOB:</b> 05/26/1963	
<b>Ins Co</b>	<b>Pol #</b>	<b>Insured</b>

---

**Date** 08/03/2017

**Provider** Dr. Jacob Young

\*\*\* continued from previous page \*\*\*

bilateral muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 15 minutes for 2 reps - 2 sets to improve kinesthetic sense, to improve posture and to improve coordination during therapeutic phase treatment. For 15 minutes at a frequency and duration of 3 visits per week for next 12 weeks

- **Therapeutic Exercise: Whole body vibration** therapeutic exercises were performed to the bilateral muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the upper leg and muscle group of the lower leg region(s) for 5 minutes for 1 reps - 1 sets to improve kinesthetic sense, to improve posture, to improve coordination, to improve proprioception for sitting activities and to improve proprioception for standing activities during therapeutic phase treatment. For 5 minutes at frequency and duration of 3 visits per week for weeks 5-12

- **Therapeutic Exercise: Static weight** assisted Therapeutic Exercises performed to the bilateral muscle group of the upper to mid cervical, muscle group of the mid to lower cervical, muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 8 minutes with 3-6 lbs for 1 reps - 1 sets to improve kinesthetic sense, to improve posture, to improve coordination, to improve proprioception for sitting activities and to improve proprioception for standing activities during therapeutic phase treatment. For 8 minutes at a frequency and duration of 3 visits per week for weeks 5-12

- **Therapeutic Exercise: Resistance band** assisted therapeutic exercises performed to the bilateral muscle group of the upper to mid cervical, muscle group of the mid to lower cervical, muscle group of the cervico-thoracic, muscle group of the upper thoracic, muscle group of the mid thoracic, muscle group of the lower thoracic, muscle group of the upper lumbar, muscle group of the lower lumbar, muscle group of the pelvic, muscle group of the shoulder and muscle group of the upper leg region(s) for 10 minutes with medium resistance band for 10-50 reps - 1 sets to improve kinesthetic sense, to improve posture and to improve coordination during therapeutic phase treatment. For 10 minutes at a frequency and duration of 3 visits per week for weeks 9-12

### Today's Treatment:

- **Chief Complaint:** right anterior pelvis/hip, left anterior pelvis/hip, left anterior thigh, right dorsal foot, posterior cervical (neck), left trapezius, upper thoracic, right posterior trapezius, left lumbar, lumbar, right lumbar, left sacroiliac, right sacroiliac, left posterior pelvis/hip, sacral, right posterior pelvis/hip, left buttock, right buttock and left posterior thigh

- **Primary Treatment:** Diversified, Drop Table and Manual- Chiropractic Manipulative Therapy (CMT) to the C2, C6, T5, T8, T11, L5, sacrum and left pelvis spinal level(s). -- -- --

- **Traction: Y-Axis mechanical traction** applied to cervico-thoracic and lumbo-sacral for 8 minutes. Exercise began at 4:40. Exercise completed at 4:48.

- **Therapeutic Exercise-Patient consented: Manual stretching** Therapeutic Exercises performed as detailed in the initial treatment plan for 15 minutes.

Exercise began at 4:48. Therapeutic wobble chair: 25 reps each of side to side, front to back, clockwise rotation, counterclockwise rotations. Cervical extension traction: 20 reps with 20 second hold on final rep-increase by 10 reps each week. Cervical/Lumbar extension traction stretch: 3 minutes. Beginner floor exercises: single knee to chest, both knees to chest, single knee to opposite shoulder, pelvic tilt, pelvic tilt with lift, cat/camel: each performed 2 times for 15-20 second hold. Precor stretchtrainer: lower back, upper back, shoulders, hips/gluteals: each performed 2 times for 15 seconds. Exercise completed at 5:03.

#### - Advised

- **Tx Effect:** Treatment rendered without incident and responding as expected.

- **Next Visit:** continue with treatment plan as scheduled

**Chart Notes**

Cindy Blaine

Black & Gold Chiropractic & Wellness  
401 S. Gilbert St.  
Iowa City, IA 52240  
Phone: (319) 337-6000  
Fax:

---

<b>Patient:</b> Blaine, Cindy	<b>DOB:</b> 05/26/1963	
<b>Ins Co</b>	<b>Pol #</b>	<b>Insured</b>
<hr/>		
<b>Date</b> 08/03/2017		
<b>Provider</b> Dr. Jacob Young		<b>*** continued from previous page ***</b>

---

- Diagnosis**
- M54.5: Low back pain
  - M62.830: Muscle spasm of back
  - M99.03: Seg and somatic dysf of lumbar reg
  - M99.05: Seg and somatic dysf of pelvic reg
  - M99.04: Seg and somatic dysf of sacral reg
  - M25.552: Pain in LT hip
  - M79.671: Pain in right foot
  - M99.06: Seg and somatic dysf of lower extremity
  - M40.03: Postural kyphosis, cervicothoracic region
  - M54.6: Pain in thoracic spine
  - M99.02: Seg and somatic dysf of thoracic reg
  - M54.2: Cervicalgia
  - M99.01: Seg and somatic dysf of cervical reg

Electronically Signed



Dr. Jacob Young 08/07/2017 06:58 PM

---