

# Chart Posting Audit Report

**Patient:** Diane R. Nelson

**Incident:** Initial Incident

Tran Date	Action	Time of Modification	Modified By
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**Encounter : 05/05/2004 06:29:34 PM**

05/04/2004 Reboot 07/06/2006 01:51:00 PM PS

**Old Data:** Tightness of the posterior neck and the upper back.

**New Data:**

05/04/2004 Reboot 07/06/2006 01:51:00 PM PS

**Old Data:** Pain of the posterior shoulder on the left (mild) and only with certain movements

**New Data:**

05/04/2004 Reboot 07/06/2006 01:51:00 PM PS

**Old Data:** Spinal palpation. Tenderness (C1, C2, C5, C6, T2, T3, T5, and T6). Subluxation (C1, C2, C4, C5, T2, T3, T5, T6, T11, T12, and L1). Palpated the splenius muscle and the trapezius muscle bilaterally: spastic and tenderness (mild to moderate). Extremity / joint palpation is noted as follows. Tenderness (the anterior shoulder on the left). Misalignment anteriorly (the humeral head on the left)

**New Data:**

05/04/2004 Reboot 07/06/2006 01:51:00 PM PS

**Old Data:** Specific adjustive procedures administered to: C1 (left), C2 (right), C4 (left), C6 (right), T2 (left), T3 (left), T1 (right), T4 (right), T6 (left), T8 (left), T11 (left), and L1 (left).

**New Data:**

05/04/2004 Reboot 07/06/2006 01:51:00 PM PS

**Old Data:** A manipulation was performed on the shoulder on the left.

**New Data:**

05/04/2004 Reboot 07/06/2006 01:51:00 PM PS

**Old Data:** Interferential current applied to: the posterior neck and the upper back.

**New Data:**

05/04/2004 Reboot 07/06/2006 01:51:00 PM PS

**Old Data:** The patient's assessed improvement: as anticipated.

**New Data:**

05/04/2004 Reboot 07/06/2006 01:51:00 PM PS

**Old Data:** Prognosis: good.

**New Data:**

05/04/2004 Reboot 07/06/2006 01:51:00 PM PS

**Old Data:** Return next week.

**New Data:**

**Encounter : 07/06/2006 01:52:21 PM**

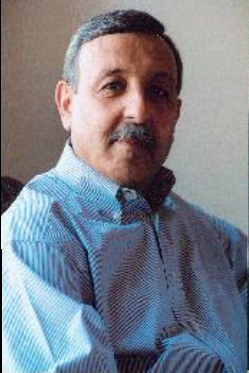
07/06/2006 Changed 07/06/2006 01:52:44 PM PS

**Old Data:** Specific adjustive procedures was administered to increase restricted joint motion and mobility to the following spinal regions: C3 (left), C4 (left), C5 (right), and C6 (right).

**New Data:** Specific adjustive procedures was administered to increase restricted joint motion and mobility to the following spinal regions: C3 (left), C4 (left), C4 (right), and C3 (right).



John K. Miller  
101 Avenue N.  
Amarillo TX 79110

Patient Information		
	Patient	John K. Miller
	Date of Birth	10/23/1960
	Patient Gender	Male
	Social Security	748-55-5123
	Marital Status	Married
	Injury / Onset	
	First Consult	04/27/2006
	Occupation	Cpa
	Employer	Miller & Associates, PC

June 2, 2006

### **Chief Complaint**

- The patient complained of pain in the posterior neck and the posterior shoulder on the left.
- Headache.

### **History of Present Illness**

- Pain. Quality: Pain (estimated intensity level 7/10). Limited motion (motion limited in all planes). Severity: stabbing and increasing. Duration: length of time since accident (5 days) and length of time since symptoms first appeared approximately (5 days). Timing: Injury: mechanism of injury (MVA [motor vehicle accident]). Associated symptoms: Accompanied with: swelling.
- Headache. Location: the anterior neck and the forehead. Duration: length of time since symptoms first appeared approximately (5 days). Associated symptoms: Accompanied with: visual disturbance.

### **Past, Family, and Social History**

#### **Past History:**

- **Surgeries.** Surgeries reported. Appendectomy [age surgery performed (8 years old)].
- **Illnesses.** Past illnesses. Usual childhood diseases. Non-contributory.

#### **Family History:**

- Father's history. Current age is 81 years old. Significant illnesses. Sciatica.
- Mother's history. Current age is 79 years old. Currently alive and well.

#### **Social History:**

- Work environment: requires lifting and stressful.
- Exercise: Limited amount of exercise.



### **MVA Accident**

Automobile accident information. Time: daylight. Injury/Accident: Patient body parts struck during collision: the posterior neck and the posterior shoulder. Patient status before accident: awake, seat belt on, and shoulder harness on.

### **Review of Systems**

#### **Constitutional:**

- Denies. Fatigue. Fever. General malaise. History of chronic fatigue syndrome. Nutritional problems. Developmental problems. Asthenia. Obesity.

#### **Cardiovascular:**

- Denies. Hypertension. Chest pain. Risk factors for cardiovascular disease. Intermittent claudication of legs. Ascites. Cold extremities. Phlebitis. Family history of heart disease. Cyanosis. Significant cardiac history. Dyspnea. Pedal edema. Rhythm disturbance. Cough. History of diseases with CVD significance. Syncope. Orthostatic hypotension. Tobacco use. Use of cardiovascular medication.

#### **Musculoskeletal:**

- Denies. Posture abnormalities. Arthritis. Abnormal muscles. Myositis. Swelling. Wasting or atrophy. Night cramps. Recent trauma or injury. Fractures. Kidney or UTI symptoms. Migratory pain. Muscular weakness. Abnormal joints.
- Reports. Recent trauma or injury. Spine problems: pain at present.

#### **Integumentary:**

- Denies. Color change of the skin. Skin pigmentation changes. Abnormal hair texture. Alopecia areata of the scalp. Pruritus or itching of the skin. Premature graying. Abnormal hair color changes. Normal male pattern baldness. Diffuse thinning of the hair. Nail pitting. Fungal infection of the nails. Nail ridging. History of significant skin disorders. Warm or hot areas of the skin. Nail distortion from psoriasis. Ingrowing nails. Infection of the nailfolds. Abnormal hair loss. Brittle nails. Abnormal nail color changes. Bleeding. Unusual hair distribution. Hirsutism. Unusual nail configuration. Abnormal sweating.

#### **Neurological:**

- Denies. Disturbance in hearing. Limitation of motion of neck. Paresthesia or numbness. Pallor. Significant memory loss. Trauma to the head. Syncope. Headaches. Visual disturbance. Dizziness. Orofacial paresthesia. Areas of decreased sensation or hypesthesia. Cyanosis. Equilibrium disturbance. Facial weakness. Smell disturbance. Difficulties in speech, swallowing, and taste. Muscular atrophy. History of stroke, coma or paralysis. Incoordination. Convulsions or seizures. Abnormal reaction to heat or cold. Unusual pain. Gait disturbance. Incontinence of urination or defecation. Abnormal sweating. Lightning or shooting pains. Motor skill loss. Areas of sensation loss or anesthesia. Involuntary movements. Erythema.
- Reports. Headaches (awakens with headaches).

#### **Hematologic / Lymphatic:**

- Denies. Anemia. Skin bleeding. Family history of hemoglobinopathy. Lymph node problems. Lymphatic malignancy.

### **Examination**



### **Constitutional:**

- Sitting blood pressure using the left arm - 133/90 mmHg.
- Sitting blood pressure (second reading) using the left arm - 128/91 mmHg.
- **Height.** Height 72 inches.
- **Weight.** Weight 225 pounds.
- **General Appearance.** Male - well nourished and anxious.

### **Cardiovascular:**

- Examination of the heart and blood vessels, unless otherwise noted, reveals the following. Palpation of the heart reveals a normal PMI in left 5th ICS with no palpable thrill, lift, or abnormal size. Femoral arteries are palpable and have no bruits. Auscultation reveals no murmurs, gallops or abnormal sounds. Pedal pulses are palpable, both dorsalis pedis and posterior tibial. Carotid artery exam reveals no bruits and full and equal pulse. Extremities have no edema or varicosities. Abdominal aorta is not palpable and no bruits are heard.

### **Musculoskeletal:**

- **Gait / Station.** Elevated - the posterior shoulder on the left. Antalgic - leans left into pain.
- The gait was assessed as follows - abnormal gait.
- **Orthopaedic Tests.** Shoulder depression testing to reproduce dural sleeve pain - positive bilaterally. Maximum cervical compression test attempting pain reproduction - positive. Jackson cervical compression test attempting to reproduce radicular pain - positive. Valsalva maneuver (simulated stool strain attempting to reproduce localized pain from a space occupying lesion of the cervical spine) - negative. SLR (straight leg raising) test - positive at 5 degrees on the left at 10 degrees on the right. Yeoman's test to localize sacroiliac joint pain - positive bilaterally.
- **Palpations.** Moderate to severe tenderness of the cervical spine. Moderate loss of motion of the cervical spine. Moderate pain of the upper thoracic spine. Stiffness / soreness of the lumbar spine.
- Moderate tenderness of the trapezius muscle on the left.
- Severe tenderness of the muscles of the posterior neck.
- Soreness of the deltoid muscle on the left.
- **Muscle Strength Test.** Cervical extensors - (+2/5 -25% - poor). Cervical flexors - (+2/5 -25% - poor). Cervical lateral flexors - (+3/5 - 50% - fair). Cervical rotators - (+3/5 - 50% - fair).
- **Range of Motions.** Cervical spine ROM. Flexion (normal 45 degrees): reduced ROM. Extension (normal 55 degrees): reduced ROM with pain. Left lateral flexion (normal 40 degrees): reduced ROM. Right lateral flexion (normal 40 degrees): reduced ROM. Left rotation (normal 70 degrees): reduced ROM with pain. Right rotation (normal 70 degrees): reduced ROM with pain.
- Thoracolumbar spine ROM reduced ROM with pain.

### **Integumentary:**

- Inspection of the skin and subcutaneous tissue revealed normal coloring, temperature, and turgor in: the head and neck, the trunk, the right upper extremity, the left upper extremity, the right lower extremity, and the left lower extremity.

### **Neurological:**

- **Orientation.** Orientation: Normal - oriented to time, place, and person.
- **Reflexes.** The deep tendon reflexes are noted. Brisk and equal: 2+ (normal, brisk and symmetrical bilaterally).
- **Coordination.** Coordination: Heel-to-toe walk (tandem gait): abnormal and instability. Romberg's (performed well).



- **Cranial Nerve III, IV, and VI.** Cranial nerves III, IV, VI (pupils and eye movements) - eye movement: normal.
- **Cranial Nerve V.** Cranial nerves V (trigeminal). Facial sensation: diminished (on the right).
- **Cranial Nerve VIII.** Cranial nerves VIII (hearing). Hearing is decreased: to finger rub on the left.
- **Cranial Nerve XI.** Cranial nerves XI (spinal accessory) - weak shoulder shrug.

### **Hematologic / Lymphatic:**

- Unless otherwise noted, examination and palpation of the lymph nodes in the neck, axillae, groin, and other locations resulted in normal findings.

### **Diagnosis**

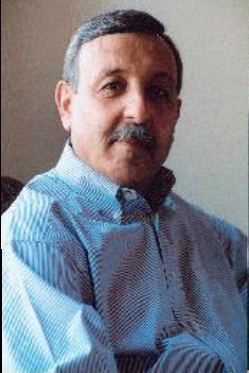
847.0 Neck sprain  
846.1 Sacroiliac (ligament) sprain  
840.9 Sprain of unspecified site of shoulder and upper arm  
E811.0 Motor vehicle traffic accident involving re-entrant collision with another motor vehicle injuring driver of motor vehicle other than motorcycle

### **Assessment:**

Impression: examination indicates manifestations of a sprain/strain of the cervical spine. Rationale for treatment and treatment objectives: the short term goals are to decrease level of acute pain and educate the patient in techniques to prevent further re-injury. The long term goals are to improve the joint mobilization of the affected areas and decrease the level of chronic pain. Schedule of care: the patient will be treated with chiropractic specific manipulative procedures to the cervical spine, the thoracic spine, and the lumbar spine 2 time(s) per week for 3 weeks. Schedule of physical modality: Myofascial release will be applied to the muscles of the posterior shoulder and the muscles of the posterior neck. Massage will be applied to the muscles of the posterior shoulder and the muscles of the posterior neck.



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June 2, 2006

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- Headache. Location: the anterior neck and the forehead. Duration: length of time since symptoms first appeared approximately (5 days). Associated symptoms: Accompanied with: visual disturbance.

**Past, Family, and Social History**

**Past History:**

- **Surgeries.** Surgeries reported. Appendectomy [age surgery performed (8 years old)].
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**Family History:**

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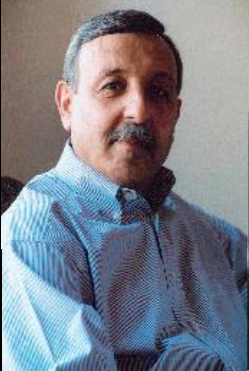
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July 6, 2006

Crawford Law Office  
630 N Cotner Blvd, Ste 101  
Lincoln NE 68505-2339

RE: Final Examination and/or Treatment Notes

Patient	Diane R. Nelson
Date of Birth	06/20/1971
Patient Gender	Female
First Consult	11/26/1999

As you know, I have been treating your client and I wanted to send you an update. Enclosed are final examination and/or treatment notes for this patient.

Please do not hesitate to contact me if you have any questions or need more information regarding this or another case.

This patient has been a pleasure to work with and, once again, I want you to know I appreciate this referral.

Sincerely,

Joseph E. Martin, D.C.

# Orders By Patient

**Source Type:** Treatment Orders  
**Results Type:** Treatment x-ray & lab results  
**Outcome:** All Outcome Codes  
**Date Range:** 03/01/2006 - 03/31/2006

Patient	Code	Phone	Order Dt	Order Description	Results Dt	Results Description
Benda, William W.	100484	308 555-3658	03/30/2006	Order from Good Samaritan Hospital Lab. Arthritic profile, CBC and Lyme Elisa and Western blot	03/30/2006	X-ray plane film views. Wrist: posteroanterior and lateral bilaterally. Left wrist Joint space appears normal. Alignment appears normal. No fracture is noted. Right wrist has degenerative changes (severe, location [the scaphoid (navicular) and the trapezium on the right], and osteophyte formation)
Krause, Vicki J.	100472	308 555-4435	03/17/2006	Order from Kearney Imaging Center. MRI: Right knee.	-- Open --	-----
Lorimer, Gwen	010345	308 555-6397	03/16/2006	Order from Kearney Imaging Center. MRI: Thoracic spine-lower region to R/O HNP and or space occupying lesions.	03/16/2006	X-ray plane film views. Thoracic spine: anteroposterior and lateral. Degenerative changes (moderate and location [the lower thoracic spine, T9, T10, and T11]). Incarceration of the intervertebral disc: T10 and T11.
Lybarger, Vicki S.	100474	308 555-4948	03/06/2006	Order from Kearney Imaging Center. MRI: low back scheduled for 2/15/06 to R/O lumbar HNP or spinal stenosis	03/06/2006	X-ray plane film views. Lumbar spine: anteroposterior and lateral. Bone density is adequate. Normal vascular appearance. Normal soft tissue appearance. Normal curves. Narrowed disc space: L3, L4, and L5. Degenerative changes (mild, location [L3, L4, and L5], and Multiple levels of facet arthrosis at L3/4, L4/5 and L5/S1, most notably at L4/5 with some mild IVF narrowing).
Stierwalt, Vaughn	100464	308 555-6079	03/16/2006	Order from Good Samaritan Hospital Lab. Thyroid profile, chem profile and CBC for fatigue and possible hypothyroidism.	03/20/2006	Glucose (FBS): 60 mg/dl, thyroid - TH4: 1.01 mg/ml, and TSH (thyroid-stimulating hormone): 1.95 µU/ml. The rest of her chemistry and CBC were WNL