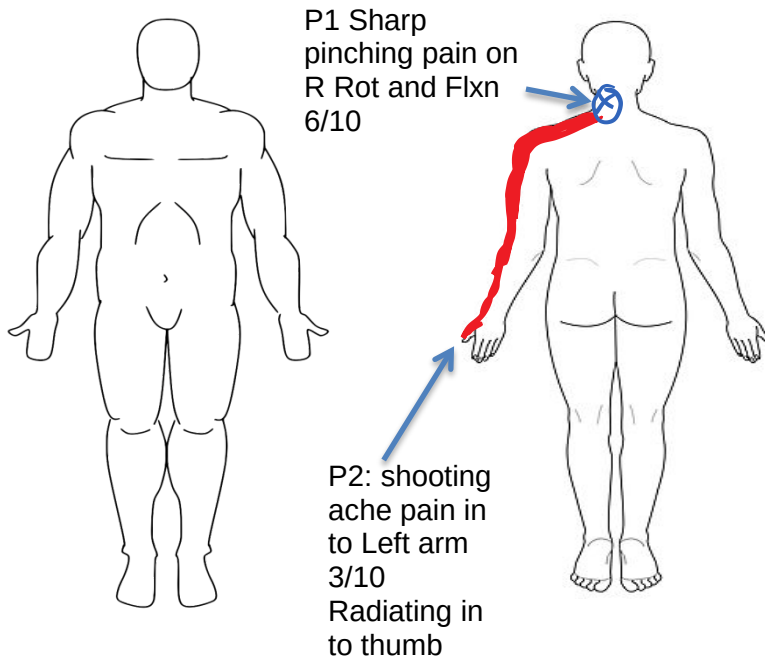




Name: Cxsp In-class Example 1

Initial Assessment Date:

Therapist:

Special Questions:

B&B: ✓✓
 C&S: ✓✓
 P&N : Yes in to L thumb
 Dizziness: ✓✓
 Drop Attack: ✓✓
 Diplopia: ✓✓
 Dysarthria: ✓✓
 Dysphagia: ✓✓
 Nausea: ✓✓
 Nystygmus: ✓✓

Address:		D.O.B:	Tel Number:	Email:
Medication: Asthma (inhaled corticosteroid)		Occupation: Office worker/administrator		GP:
Past Medical History (previous operations, accidents, illness, other health problems): R ACL reconstruction 5 years ago, hamstring graft L clavicular # at age of 11 years				
Sport / Exercise (type, level, position, competition, training (intensity, frequency, duration)): Recreational fitness. Step aerobics weekly. Swimming weekly, badminton weekly.				
Main Problem: L arm pain				
History of the present condition (when, activity, mechanism): Awoke after sleeping with P1 on flxn and RRot 2/52. Felt muscles in Cxsp tightened/stiffen. Took NSAIDs with some moderate relief. Had not noticed anything out of the ordinary on the day before. 1/52 noticed P2. Gradual worsening over past week. Difficulty lifting full kettle/now affecting ADL. P2 worse with Flxn.				
Aggravating: P1: Flxn and RRot Immediate P2: Flxn 10minutes		Easing: P1: Immediate ease if moved out of position P2: 50-60minutes once aggravated.		
Sleep: Difficulty finding a comfortable position. Now sleeps on back without pillow.	Behaviour of Symptoms: Intermittent. Muscle tightness towards the end of day in upper traps region. P1 & 2 only when aggravated.		SIN:	
Observation: Thoracic kyphosis and lordotic lumbar spine			Touch: No temperature or texture changes	

ROM:	A	P	R
Flxn	P1 ↓	P1 MOR P>R	P1 weak
Extn	✓ ✓	✓ ✓	Discomfort ✓
LSF	✓ ✓	✓ ✓	✓ ✓
RSF	Pulling 6/10	P1 EOR P>R	P1 weak
LRot	✓ ✓	✓ ✓	✓ ✓
RRot	P1 ↓	P1 MOR P>R	P1 ✓
Pro	P1 3/10 ✓	P1 1/10 ✓	P1 weak
Ret	✓ ✓	✓ ✓	✓ ✓
Muscles: SCM L ✓ ✓ R ✓ ✓ Upper fibres of trapezius L ✓ ✓ R ✓ ✓			
Palpation: Upper fibres of trapezius tightness L			
Ligaments: Not tested for cxsp		Joints above and below: Txsp Flxn ✓ ✓ Extn ✓ ✓ LSF ✓ ✓ RSF P1 ✓ , LRot ✓ ✓ , RRot P1 ✓ Shoulder: Flxn ✓ ✓ , Extn P2 1/10 ✓ , abd P2 1/10 ✓ , MR ✓ ✓ , LR P2 1/10 ✓	
Functional:		Other tests: VBI ✓ ✓ ULTT1: P2 tight L ULTT 2a: P2 tight L ULTT 2b: P1 ✓ L ULTT 3: P1 ✓ L	
Clients Name & DOB:			Date:
Sports Therapist:			Date:

			Patient Name & DOB:		
	←	↙	↓	↘	→
C₂					
C₃					
C₄	✓ ✓	✓ ✓	✓ ✓	✓ ✓	✓ ✓
C₅	Sharp 5/10 ✓	Sharp 5/10 ✓	Sharp 4/10 ✓	✓ ✓	✓ ✓
C₆	P1 stiff ✓	P1 Stiff ↓	P1 Stiff ↓	Stiff ✓	✓ ✓
C₇	P1 3/10 ✓	P1 3/10 ✓	P1 1/10 ✓	Stiff ✓	✓ ✓
T₁	✓ ✓	✓ ✓	✓ ✓	✓ ✓	✓ ✓
T₂					
T₃					
T₄					

Additional testing:

Dermatomes

C4, C5, C7, C8, T1 ✓ ✓

C6 diminished dermatome on L 75% of R

Myotomes:

Flexion, extension, LSF/RSF, Upper traps, deltoids, triceps, EPL & FDP, PADS and DABs ✓ ✓

Biceps weakness on L.

Reflex:

Biceps and brachoradialis jerk diminished on L

Other MMTs:

Brachialis weak on L

Patient Name & DOB:

Aims:	Date Achieved:
Long term goal (LTG):	
Short term goals (STG): 1: 2: 3: 4:	
Objective Markers:	

Date:	Treatment:	Outcome:	Signature: