

Low level MDM SOAP – Re-Evaluation Follow Up Acupuncture Encounter

Test 1 Test a 30 years of age male presents in the acupuncture clinic.

Patient identity confirmed by name and DOB: Yes

Initial visit: 07/11/2020

Today 07/28/2020 is acupuncture encounter # 6 this year.

This is session # 6 for this complaint.

It has been 5 week(s) since last visit.

Topical Allergies reviewed: **Nickel**

Medication reviewed: Yes

Cautions: **Claustrophobic**

Chief complaint(s):

1. Chronic low back pain
2. Headache

SUBJECTIVE

Test 1 Test presents today in the acupuncture clinic to keep addressing chronic dull low back pain. Pain started after camping trip 5 months ago to the lake. Pain continues to aggravate with rainy weather. Is able to return to work.

VA pain rating scale

Pain severity: 2-3 /10 (on the scale 1 to 10, 0 = no pain, 10 = unbearable pain)

Affected Daily Life Activity (ADL): Severity 2/10 (on the scale 1 to 10, 0 = does not interfere, 10 = completely interferes)

Pain interfering with SLEEP: 0/10 (on the scale 1 to 10, 0 = does not interfere, 10 = completely interferes)

Pain affecting MOOD: 2/10 (on the scale 1 to 10, 0 = does not interfere, 10 = completely interferes)

Pain contributing to STRESS: 2/10 (on the scale 1 to 10, 0 = does not interfere, 10 = completely interferes)

How frequently you see other health care provider for you pain? none

Current and/or Prior treatment:

Medication/dosage: Ibuprophen occasionally

Secondary complaint: occasional dull frontal headache with 3/10 before the rain. Sinuses are congested depending on weather. Uses Flonase occasionally.

OBJECTIVE

Physical Exam

Tenderness/pain with palpation: right lumbar region

Trigger/Ashi points: at right Yaoyan

ROM: Norm

Ortho tests: Straight leg raise test - negative

HARA examination: none performed

Visual inspection/Observation

Discolorations: none

Edema: none

Ambulation/Gait: norm

Spirit/Shen: Alert

Qi: Normal breathing

5 element constitution: N/A

Labs: None relevant

Imaging: None relevant

TM Tongue: pink, thicker white coat

TM Pulse: moderate, slippery on guan

ASSESSMENT

Response to the previous treatment: chronic dull low back pain and headache have improved by 50% after 6 sessions of acupuncture meeting short term goal. Radiating pain to the buttock is gone. Reduced Ibuprofen from 2 x 2 times a day to occasional intake and is able to return to work.

Relevant Imaging/Labs – none new

Patient complaints, subjective symptoms and objective signs are reviewed and analyzed based on Traditional Medicine theory: 5 Element, Organ.

Continue with established treatment strategy: treat Manifestation/Branch and Cause/Root simultaneously

The amount of data assessed at this encounter is consistent with the low complexity level of Traditional Medicine decision-making.

The following problems are addressed at this encounter.

1.

ICD-10 Diagnosis: M54. Chronic Low back pain

ICD-11 Chapter 26 TM pattern: **SE82 Dampness factor pattern (TM1)**

2.

ICD-10 Diagnosis: R51 headache

ICD-11 Chapter 26 TM pattern: **SF72 Spleen deficiency with qi stagnation pattern (TM1)**

TM Treatment Strategy: Relieve pain, dispel dampness, tonify Spleen, Move Qi.

PLAN OF CARE

Counseled patient on risks of acupuncture including pain, infection, bleeding, and no relief of pain.

Patient was educated on acupuncture benefits, plan of care and activity modifications.

All questions were answered. Patient verbalized understanding and agreed to begin care.

Acupuncture:

Needles Set 1, *Position:* Supine.

Style: Tung

Points: Ling Gu (22.05), Si Ma Zhong (88.17), Si Ma Shang (88.18), Si Ma Xia (88.19), Si Huang Shang (77.08) – 12 minutes spent face to face with the patient for set 1

Needles Set 2, *Position:* Supine

Style: TCM

Points: Sp9, Sp3, K7 – 8 minutes spent face to face with the patient for set 2

Needles were retained for 30 minutes

of needle inserted: 16

of needles withdrawn: 16

TCM topicals used: Zheng Gu Shui on lumbar

TDP lamp applied to: CV4

Adjunct techniques used: None

E-Steam: None Applied.

Adverse Events: None, patient tolerated the procedure well.

Therapy outcomes: Therapeutic

Short term goal:

Reduce pain by 90% in 6 sessions.

Improve ROM by N/A in N/A sessions

Improve ADLs: ability to return to martial arts workouts

Long term goal:

Reduce pain by 100 % in 3 months.

Improve ROM by N/A in N/A months

Improve ADLs: to achieve unrestricted performance

HOME GOING INSTRUCTIONS

Follow up acupuncture schedule: 1 time a week for 6 sessions then re-evaluate.

Referrals: None

Ear seeds/pellets: None

Home Use Topical Rx: Zheng Gu Shui Spray

Dosage instruction: Apply on painful area as needed. Do not cover the area, do not use heat or ice on the top. Wash your hands thoroughly after use.

Home use acupressure: None.

Physical Activities: Continue gentle stretching for low back, avoid sudden movements. Specific modifications were discussed and handout with detailed instructions was given for at home reference.

TM Dietary recommendations: Eliminate DAIRY – that are dampness promoting foods - Specific recommendations were discussed and handout with detailed instructions was given for at home reference.

What to expect after acupuncture:

After the removal of acupuncture needles, there may be some minor soreness, itch, little to no sensation in the treatment area. In rare occasion, there can be mild bruising/bleeding. The bruising will gradually fade away in a couple of weeks.

If you have not eaten before acupuncture, you may experience dizziness/nausea. Drink some warm fluids to help with the symptoms.

If you had acupuncture treatment for chronic pain, you may experience some ache sensation for a couple of days. This will gradually dissipate with subsequent sessions.

Acupuncture is a fairly safe procedure, but if you had needles near/around your ribcage and are experiencing any of these symptoms, contact your acupuncturist immediately:

- Sudden shortness of breath
- Increase breathing rate
- Chest pain
- Dry cough
- Bluish discoloration of the skin
- Excessive sweating that you never experience before

After acupuncture treatment, you should rest/relax for a few hours. Do not shower or get yourself wet. Avoid strenuous workouts or stressful situations. It is normal to feel tired or sleepy after the acupuncture treatment.

Having questions or concerns? Please, send me a message via your secure patient's portal, they will be answered within one business day.

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20 minutes was spent on Established Patient Present Illness Evaluation

25 minutes was spent on acupuncture procedures face to face with the patient

45 total minutes spent at this encounter.

Coding:

99213: Office or other outpatient visit for the evaluation and management of a Established patient

97810: Acupuncture, one or more needles, without electrical stimulation, initial 15 minutes of personal one-on-one contact with the patient.

97811: Each additional 15 minutes of personal one-on-one contact with the patient, with re-insertion of needles.

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