

Low level MDM - Initial Acupuncture SOAP

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

Patient identity confirmed by name and DOB: Yes

Today 07/11/2020 is Initial 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 address chronic “pulling” constant low back pain radiating to right buttock that started after camping trip 4 months ago to the lake and is worse with rainy weather.

It is hard to turn and bend, prevents me from working out and makes it hard to work for longer than 4 hours.

1. Musculotendinous Meridian System:

Pain location: lumbar region, radiating along L4 dermatome (ST meridian)

Pain duration: 4 months,

Pain onset: Abruptly

Pain character: Radiating, Constant,

Pain quality: Achy, Numb/Heavy,

Pain worse with: Cold, Weather humid

Pain better with: Heat,

VA pain rating scale

Pain severity: **4/10** (on the scale 1 to 10, 0 = no pain, 10 = unbearable pain)

Affected Daily Life Activity (ADL): Severity **4/10** (on the scale 1 to 10, 0 = does not interfere, 10 = completely interferes)

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

Pain affecting MOOD: **5/10** (on the scale 1 to 10, 0 = does not interfere, 10 = completely interferes)

Pain contributing to STRESS: **4/10** (on the scale 1 to 10, 0 = does not interfere, 10 = completely interferes)

How frequently you see other health care provider for you pain? Every week see some one

Current and/or Prior treatment: Chiropractor – did not help, Massage – helps for the same day,

Medication/dosage: Ibuprophen 2 pills – 2 times a day

Secondary complaint: frequent 2-4 times a week, dull frontal headache with 3/10 severity and sensation of heaviness in the body. Sinuses are congested. Uses Flonase occasionally.

Medical History Relevant to Complaint(s): Has had frequent falls and exposure to weather while was in the army

Social Determinants of health:

Weight - stable,
Physical activities –martial arts workouts,
Current occupation - works as a plumber,
Veteran - Yes,
Addiction - smoking,

Family History: Father – diabetes. Mother – high blood pressure, breast cancer.

Review of Systems:

Constitution: Norm

Energy: Norm

Sleep: 6-Hours per night, Norm

Psycho-emotional: Frustrated, Irritable/angry, due to pain limiting work outs and affecting work

LV/GB: Norm

LU: Norm

LI: Norm

SP/ST: loose stool

HT/SI: Norm

K/UB: Norm

Libido/Sexual Function: Norm

Andrologic History: Norm

Gynecologic History: N/A

OBJECTIVE

Physical Exam

Tenderness/pain with palpation: along SP meridian sticky and congested

Trigger/Ashi points: Multiple Point(s)

ROM: Norm

Ortho tests: Straight leg raise test - negative

HARA examination: Damp at HT & SP area

Visual inspection/Observation

Discolorations: Dull, congested, lusterless skin

Edema: none

Ambulation/Gait: norm

Spirit/Shen: Alert

Qi: Normal breathing

5 element constitution: N/A

Labs: None relevant

Imaging: No pathology was found on X-Ray from 11/29/2019

TM Tongue: N/A

TM Pulse: kyo-jitsu (excess within deficiency); floating; moderate speed

ASSESSMENT

Test 1 Test presents today in the acupuncture clinic to address chronic low back pain radiating into right buttock and headache, which are getting progressively worse.

Relevant Imaging/Labs were reviewed.

Patient complaints, subjective symptoms and objective signs are reviewed and analyzed based on Traditional Medicine theory: 5 Element and are indicative of SP sho with LR sokoku.

Treatment strategy established: 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: M54.5 Low back pain with right side sciatica

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, disperse Liver Qi stagnation and Dampness excess gently, tonify SP deficiency.

PLAN OF CARE

Risk, Benefit, Alternative Personnel, Equipment, Financial Responsibilities and Consent discussed with patient and Informed Consent was gathered. Intake form located in patient file.

Acupuncture is not a substitute for conventional medical diagnosis and treatment. Patient agrees that either: 1. A diagnostic exam has been performed by a physician or chiropractor within the last 6 months or 2. If no diagnostic exam by a physician or chiropractor has been done within the last six months regarding the condition for which patient is seeking treatment, the Licensed Acupuncturist, per State Law, recommends that this diagnostic exam be performed.

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: Toyohari,

Points: Branch Tx: ST25, RN 3, 14 (Chiketsu); LI luo (Shigo needle) – 12 minutes spent face to face with the patient for set 1

Needles Set 2, *Position:* Supine

Style: Toyohari.

Points: Root Tx: Left side - SP3, PC7 (ho ho - tonification technique), Right side - LR3 (sha ho - dispersion technique) – 8 minutes spent face to face with the patient for set 2

Needles were retained for 30 minutes

of needle inserted: 12

of needles withdrawn: 12

TCM topicals used: None

TDP lamp applied to: None

Adjunct techniques used:

Moxibustion: Okyu on ah-shi points at buttocks, Okyu x bilaterally at ST 36 & Qi hai, and

Micro bleeding at points along GB or BL points on affected side - 5 minutes spent face to face with the patient

E-Steam: None Applied.

Adverse Events: None, patient tolerated the procedure well.

Therapy outcomes: Therapeutic

Short term goal:

Reduce pain by 50% in 6 sessions.

Improve ROM by N/A in N/A sessions

Improve ADLs: ability to twist and bend, increase ability to perform work semi comfortably to 6 hours

Long term goal:

Reduce pain by 75% in 3 months.

Improve ROM by N/A in N/A months

Improve ADLs: Allow for comfortable work performance to 8 hours with some workouts

HOME GOING INSTRUCTIONS

Follow up acupuncture schedule: 2-3 times 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: Limit 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.

Provider Name: Toyohari 1 Toyohari LAc.

35 minutes was spent on New Patient Present Illness Evaluation

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

60 total minutes spent at this encounter.

Coding:

99203: Office or other outpatient visit for the evaluation and management of a new 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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