

Straightforward - Acupuncture Initial Encounter - SOAP

Test Zero a 20 years of age female presents in the acupuncture clinic.

Patient identity confirmed by name and DOB: Yes

Today 07/11/2020 is Initial visit

Topical Allergies reviewed: None

Medication reviewed: Yes

Cautions: **Cosmetic implants - breast**

Chief complaint: acute severe neck pain

SUBJECTIVE

Test Zero presents today in the acupuncture clinic to address severe acute neck pain that started 3 days ago after she was rear-ended in MVA. It was low speed and no air-bags was deployed, she just got scared and had her neck "jerk". Had no pain immediately after accident but next day woke up with locked neck and pain is getting progressively worse. Pain "makes me cry"

Cannot use the computer due to neck pain aggravation on flexion. Pain interferes with her ability to fall asleep and stay a sleep

1. Musculotendinous Meridian System:

Pain Assessment

Pain location: neck and upper back,

Pain duration: 3 days

Pain onset: Abruptly

Pain character: Fixed at one place

Pain quality: Sharp,

Pain worse with: Movement – mostly neck flexion and extension

Pain better with: Cold,

VA pain rating scale

Pain severity: **8/10** (on the scale 1 to 10, 0 = no pain, 10 = unbearable pain)

Affected Daily Life Activity (ADL): Severity **9/10** (on the scale 1 to 10, 0 = does not interfere, 10 = completely interferes)

Pain interfering with SLEEP: **7/10** (on the scale 1 to 10, 0 = does not interfere, 10 = completely interferes)

Pain affecting MOOD: **9/10** (on the scale 1 to 10, 0 = does not interfere, 10 = completely interferes)

Pain contributing to STRESS: **9/10** (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 day

Current and/or Prior treatment: Chiropractor, - could not adjust because it is too painful to touch

Medication/dosage: 2 Alive 3 times a day, Ice frequently – numbs it

Secondary complaint: N/A

Medical History Relevant to Complaint(s): N/A

Social Determinants of health: N/A

Family History: N/A

Review of Systems: N/A

OBJECTIVE

Physical Exam

Tenderness/pain with palpation: severely painful on light touch cervical and upper back muscles, along Gb and UB meridian(s)

Trigger/Ashi points: Multiple

ROM: 90% Reduced

Ortho tests: Positive cervical resistance test, Negative cervical compression test

HARA examination: None Performed

Visual inspection/Observation

Discolorations: none

Edema: none

Ambulation/Gait: Norm,

Spirit/Shen: Alert

Qi: Normal breathing

5 element constitution: Crying Emotion

Labs: None relevant

Imaging: None relevant

TM Tongue: pink, thin white coat

TM Pulse: moderate, string-like

ASSESSMENT

Test Zero presents today in the acupuncture clinic to address acute neck pain that started after whiplash injury and is getting progressively worse.

Patient complaints, subjective symptoms and objective signs are reviewed and analyzed based on Traditional Medicine theory: TCM Meridian, Microsystem.

Treatment strategy established: treat Manifestation/Branch only and address Cause/Root later

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

The following problems are addressed at this encounter.

1.

ICD-10 Diagnosis: S13.4 Sprain and strain of cervical spine

ICD-11 Chapter 26 TM pattern: **SE91 Qi stagnation pattern (TM1), SF01 Blood stasis pattern (TM1), SG5Y Other specified meridian and collateral patterns (TM1)**

TM Treatment Principle: Relieve pain, promote smooth movement of Qi and Blood in the neck, open GB and LU meridians and collaterals, calm Shen

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 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:* Sited.

Style: Su Jok,

Points: Neck reflex big toe bilateral, manipulation with active neck movement – 12 minutes spent face to face time with the patient for set 1

Needles Set 2, *Position:* Supine

Style: Japanese Manaka - Famous Master,

Points: LI-Black → LV3-Red – 8 minutes spent face to face time with the patient for set 2

Needles were retained for 30 minutes

of needle inserted: 6

of needles withdrawn: 6

TCM topicals used: Po Sum On

TDP lamp applied to: Feet

Adjunct techniques used: GuaSha - on the neck area – caused expected mild petechia - 3 minutes spent face to face time with the patient

E-Steam: None

Adverse Events: None, patient tolerated the procedure well.

Therapy outcomes: Therapeutic

Short term goal:

Reduce pain by 50 % in 6 sessions.

Improve ROM by 30 % in 6 sessions

Improve ADLs: restore ability to work on computer for at least 2 hours. Improve sleep and mood

Long term goal:

Reduce pain by 75 % in 1 months.

Improve ROM by 50 % in 1 months

Improve ADLs: restore ability to work on computer for at least 4 hours. Resolve sleep concerns.

HOME GOING INSTRUCTIONS

Follow up acupuncture schedule: 3 times a week for 6 sessions then re-evaluate.

Referrals: Advised to see her MD for proper diagnosis

Ear seeds/pellets: Points ShenMen. Patient was instructed to remove them after 3 days

Home Use Topical Rx: **Zheng Gu Shui** spray – day time, **Tiger Balm patch** – night time

Dosage instructions: 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.

Patch may be retained on the skin up to 8 hours, it may cause redness and rash. Do not use patch if you have latex allergy.

Home use acupressure: LI acupoint – stimulate 3 times a day, patient was demonstrated how to affect specific points and handout with detailed instructions was given for at home reference.

Physical Activities: Gentle passive neck stretching. Specific modifications 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: Manaca O Manaca LAc.

22 minutes was spent on New Patient Present Illness Evaluation

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

45 total minutes spent at this encounter.

Coding:

99202: 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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