**SOAP - Acupuncture Initial Encounter**

@NAME@ a @AGE@ @SEX@ presents in the acupuncture clinic.

Patient identity confirmed by name and DOB: \*\*\*Yes **\*\*\*NO**

Today @TODAYDATE@ is Initial encounter

Topical Allergies reviewed: \*\*\*Alcohol \*\*\*Latex/bandage \*\*\*Nickel \*\*\*None

Medication reviewed: Yes \*\*\*Warfarin/Coumadin \*\*\*Current Chemotherapy

Cautions: \*\*\*None \*\*\*Implanted device, \*\*\*Cosmetic implants \*\*\*Lymphedema \*\*\*Claustrophobic

**Chief complaint(s**): \*\*\*

**SUBJECTIVE**

@NAME@ presents today in the acupuncture clinic to address \*\*\*

1. *Musculotendinous Meridian System*: \*\*\*No pain

*Pain Assessment*

*Pain location*: \*\*\*

*Pain duration*: \*\*\*

*Pain onset*: \*\*\*Gradually \*\*\*Abruptly \*\*\*

*Pain character:* \*\*\*Moves from place to place, \*\*\*Fixed at one place, \*\*\*Generalized \*\*\*Radiating, \*\*\*Constant, \*\*\*Intermittent \*\*\*

*Pain quality:* \*\*\*Sharp, \*\*\*Stiff, \*\*\*Achy, \*\*\*Numb/Heavy, \*\*\*Burning/Tingling, \*\*\*Stabbing

*Pain worse with*: \*\*\*Pressure, \*\*\*Movement, \*\*\*Cold, \*\*\*Heat, \*\*\*Weather \*\*\*

*Pain better with*: \*\*\*Pressure, \*\*\*Movement, \*\*\*Cold, \*\*\*Heat, \*\*\*Weather \*\*\*

*VA pain rating scale*

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

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

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

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

*Pain contributing to STRESS*: **\*\*\*/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*? \*\*\*

*Current and/or Prior treatment:* \*\*\*Blocks/Injections, \*\*\*Surgery, \*\*\*Chiropractor, \*\*\*Massage, \*\*\*Physical Therapy, \*\*\*Dry Needling, \*\*\*Psychologist, \*\*\*Psychiatrist,

Medication/dosage \*\*\*

***Secondary complaint*:** \*\*\*

***Medical History Relevant to Complaint(s*):** \*\*\*

***Social Determinants of health***:

Weight/Diet - \*\*\*,

Current occupation - \*\*\*,

Physical activities - \*\*\*,

Housing - \*\*\*,

Veteran - \*\*\*Yes \*\*\*No,

Addictions - \*\*\*

***Family History***: \*\*\*

***Review of Systems:***

1. *Constitution*: \*\*\*Tend to feel hot, \*\*\*Hot flashes, \*\*\*Tend to feel cold, \*\*\*Cold hands and feet, \*\*\*Alternating chills and fever, \*\*\*Night sweats, \*\*\*No sweat, \*\*\*Sweat with no exertion, \*\*\*Thirsty/ Dry mouth, \*\*\*Prefer cold beverages, \*\*\*Prefer hot beverages, \*\*\*Norm.
2. *Energy:* \*\*\*Low,\*\*\*High,\*\*\*Feel better after exercise, \*\*\*Feel worse after exercise, \*\*\*Norm.
3. *Sleep*: \*\*\*Hours per night, \*\*\*Difficulty falling asleep, \*\*\*Difficulty to stay asleep, \*\*\*Vivid/disturbing dreams, \*\*\*Excessive sleep, \*\*\*Wake unrefreshed, \*\*\*Norm.
4. *Psycho-emotional*: \*\*\*Irritable/angry, \*\*\*Frustrated, \*\*\*Courageous, \*\*\*Indecisive, \*\*\*Creative; \*\*\*Happy, \*\*\*Agitated/restless, \*\*\*Determined, \*\*\*No motivation, \*\*\*Compassionate; \*\*\*Excessively worry, \*\*Obsessive, \*\*\*Easy learner, \*\*\*Attention deficit, \*\*\*Nurturing; \*\*\*Sad/Grieving, \*\*\*Anxious, \*\*\*Easy going, \*\*\*Reserved, \*\*\*Organized; \*\*\*Fearful, \*\*\*Roofless, \*\*\*Lacking will, \*\*\*Stubborn, \*\*\*Spiritual.
5. *LV/GB:* \*\*\*Dizzy/lightheaded, \*\*\*Vertigo (room spinning), \*\*\*Dry skin, \*\*\*Brittle nails, \*\*\*Red/ itchy /dry eyes, \*\*\*Floating spots in vision, \*\*\*Ear ringing high pitched, \*\*\*Lump in throat, \*\*\*Pain under ribs, \*\*\*Norm.
6. *LU:* \*\*\*Wheezing, \*\*\*Short of breath, \*\*\*Coughing, \*\*\*Tight sensation in chest, \*\*\*Seasonal allergies, \*\*\*Easily catch cold, \*\*\*Sinus congestion, \*\*\*Nasal discharge, \*\*\*Norm.
7. *LI*: \*\*\*Constipation, \*\*\*Loose stool, \*\*\*Diarrhea, \*\*\*Cramps with bowel movement, \*\*\*Incomplete bowel movement, \*\*\*Burning with bowel movement, \*\*\*Hemorrhoids, \*\*\*Blood or mucus in the stool, \*\*\*Bowel incontinence, \*\*\*Foul stool odor, \*\*\*Norm.
8. *SP/ST:* \*\*\*Foggy-headed, \*\*\*Easily bruised, \*\*\*Abdominal pain, **\*\*\***Low appetite, \*\*\*Excessive appetite, \*\*\*Cravings, \*\*\*Bad breath, \*\*\*Nausea/Vomiting, \*\*\*Heartburn/reflux, \*\*\*Ulcer, \*\*\*Abdominal bloating, \*\*\*Gurgling noises in stomach, \*\*\*Gas, \*\*\*Fatigue after eating, \*\*\*\*Recent weight gain, \*\*\* Recent weight loss, \*\*\*Norm.
9. *HT/SI:* \*\*\*Poor concentration, \*\*\*Sores on tip of tongue, \*\*\*Heart palpitations, \*\*\*Ankle swelling, \*\*\*Norm.
10. *K/UB:* \*\*\*Forgetful, \*\*\*Diminished hearing, \*\*\*Ear ringing low pitched, \*\*\*Hair loss, \*\*\*Urine color, \*\*\*Cloudy urine, \*\*\*Scanty urine, \*\*\*Frequent urine, \*\*\*Burning with urination, \*\*\*Strong urine odor, \*\*\*Decreased bladder control, \*\*\*Frequent awakening at night to urinate, \*\*\*Frequent UTI, \*\*\*Norm.
11. *Reproductive System*

*Libido/Sexual Function*: \*\*\*Low, \*\*\*High, \*\*\*Norm

*Testicular Health:* \*\*\*Swollen testes, \*\*\*Testicular pain, \*\*\*Impotence, \*\*\*Premature ejaculation, \*\*\*Feeling of cold or numbness in testicles, \*\*\*Erectile dysfunction, \*\*\*Norm

*Female Health and Gynecological History:*

*Menopause*: \*\*\*No \*\*\*Yes - date of last menstrual period: \*\*\*

*Age when menses began*: \*\*\*

*Date of last period*: \*\*\*

*Regular Cycle*: \*\*\*Yes \*\*\* No

*Average number of days of menstruation*: \*\*\*

*Average number of days of menstrual cycle*: \*\*\*

*Menstrual flow is*: \*\*\*Light \*\*\*Moderate \*\*\*Heavy \*\*\*Very heavy \*\*\*Clotted (\*\*\*small red \*\*\*large purple)

*Blood Color*: \*\*\*Pink \*\*\*Red \*\*\*Purple \*\*\*Brown

*Vaginal discharge*: \*\*\*

*PMS symptoms*: \*\*\*Nausea, \*\*\*Depression, \*\*\*Anxiety, \*\*\*Headaches, \*\*\*Migraines, \*\*\*Irritability, \*\*\*Breast swelling, \*\*\*Breast tenderness, \*\*\*Cramping, \*\*\*Dull pain, \*\*\*Sharp pain, \*\*\*Bloating, \*\*\*Vomiting, \*\*\*Food Craving, \*\*\*None

*Numbers of pregnancies*: \*\*\*

*Number of live births*: \*\*\*

*Number of miscarriages*: \*\*\*

*Number of abortions*: \*\*\*

**OBJECTIVE**

***Physical Exam***

*Tenderness/pain with palpation*: \*\*\* muscles, along \*\*\* meridian(s) \*\*\*None

*Trigger/Ashi points*: \*\*\*Multiple \*\*\*Point(s) \*\*\*None

*ROM*: \*\*\*Reduced \*\*\*Norm

*Ortho tests*: \*\*\*Norm \*\*\*None Performed

*HARA examination*: \*\*\*None Performed \*\*\*

**Visual inspection/Observation**

*Discolorations*: \*\*\*

*Edema*: \*\*\*

*Ambulation/Gait*: \*\*\*Norm, \*\*\*Walks with the walker \*\*\*In the wheel chair

*Spirit/Shen*: \*\*\*Alert \*\*\*Disoriented

*Qi*: \*\*\*Normal breathing \*\*\*Labored breathing \*\*\*Week/low voice

*5 element constitution*: \*\*\*Color, \*\*\*Sound, \*\*\*Fragrance, \*\*\*Emotion

***Labs:*** \*\*\*None relevant \*\*\*

***Imaging*:** \*\*\*None relevant \*\*\*

***TM Tongue***: \*\*\*

***TM Pulse***: \*\*\*

**ASSESSMENT**

@NAME@ presents today in the acupuncture clinic to address \*\*\*acute \*\*\*chronic \*\*\*, which are \*\*\*getting progressively worse \*\*\*stable \*\*\*improving.

Relevant Imaging/Labs were reviewed.

Patient complaints, subjective symptoms and objective signs are reviewed and analyzed based on Traditional Medicine theory: \*\*\*TCM Eight Principles, \*\*\*TCM Meridian, \*\*\*Organ (Zang-Fu), \*\*\*5 Element, \*\*\*Microsystem, \*\*\*Biomedicine, \*\*\*.

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

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

The following problems are addressed at this encounter.

1.

*ICD-10 Diagnosis: \*\*\**

*ICD-11 Chapter 26 TM pattern:* \*\*\*

2.

*ICD-10 Diagnosis: \*\*\**

*ICD-11 Chapter 26 TM pattern:* \*\*\*

*TM Treatment Principle*:  \*\*\*

**PLAN OF CARE**

Risk, Benefit, Axillary 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 \*\*\*Supine \*\*\*Prone \*\*\*Lateral recumbent.

*Style:* \*\*\*TCM, \*\*\*KHT, \*\*\*Su Jok, \*\*\*Toyohari, \*\*\*Famous Master, \*\*\*5 Element, \*\*\*.

*Points*: \*\*\*

\*\*\*minutes spent face to face time with the patient for set 1

Needles Set 2, *Position*: \*\*\*Sited \*\*\*Supine \*\*\*Prone \*\*\*Lateral recumbent

*Style*: \*\*\*TCM, \*\*\*KHT, \*\*\*Su Jok, \*\*\*Toyohari, \*\*\*Famous Master, \*\*\*5 Element, \*\*\*.

*Points*: \*\*\*

\*\*\*minutes spent face to face time with the patient for set 2

Needles were retained for 30 minutes

# of needle inserted: \*\*\*

# of needles withdrawn: \*\*\*

*TCM topicals used*: \*\*\* Zheng Gu Shui \*\*\*Po Sum On \*\*\*None

*TDP lamp applied to*: \*\*\* Lumbar \*\*\*Feet \*\*\*Neck \*\*\*Abdomen \*\*\*None

*Adjunct techniques used*: \*\*\*None \*\*\*GuaSha \*\*\*Cupping, \*\*\*Tuina - on the \*\*\*area - \*\*\* minutes spent face to face time with the patient

*E-Steam*: \*\*\*None Applied to \*\*\* Wave pattern set to DD (\*\*\*1), Frequency set to \*\*\*2:0Hz, Intensity set to patient's tolerance.

Adverse Events: Bruise at \*\*\* \*\*\*None, patient tolerated the procedure well.

***Therapy outcomes:*** *\*\*\**Therapeutic \*\*\*Symptom management \*\*\*Palliative

***Short term goal***:

Reduce pain by \*\*\*% in \*\*\* sessions.

Improve ROM by \*\*\*% in \*\*\* sessions

Improve ADLs: \*\*\*

***Long term goal:***

Reduce pain by \*\*\*% in \*\*\* months.

Improve ROM by \*\*\*% in \*\*\* months

Improve ADLs: \*\*\*

*HOME GOING INSTRUCTIONS*

***Follow up acupuncture schedule:*** \*\*\* times a week for \*\*\* sessions then re-evaluate. \*\*\*As needed.

*Referrals:* \*\*\*None \*\*\*Advised to see \*\*\*

*Ear seeds/pellets:* Points \*\*\* Patient was instructed to remove them after \*\*\* days

*Home Use Topical Rx*:\*\*\*

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 rush. Do not use patch if you have latex allergy.

*Home use acupressure****:*** \*\*\*None \*\*\*patient was demonstrated how to affect specific points and handout with detailed instructions was given for at home reference.

*Physical Activities****:*** \*\*\*None \*\*\* Specific modifications were discussed and handout with detailed instructions was given for at home reference.

*TM Dietary recommendations****:*** \*\*\*None \*\*\* Specific recommendations were discussed and handout with detailed instructions was given for at home reference.

*TCM Rx Herbal Formula* (\*\*\* manufacturer): (patent, Lot #\*\*\*) **\*\*\***

Dosage and instruction for use:

1. Take \*\*\* packets \*\*\*capsules \*\*\*tablets with full glass of warm water
2. \*\*\*times a day, Separate from your med's and supplements by 1 hour
3. for \*\*\* days \*\*\*till gone \*\*\*indefinitely

***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/Signature: \*\*\* Credentials: \*\*\*.

\*\*\* minutes was spent on New Patient Present Illness Evaluation

\*\*\* minutes was spent on acupuncture procedures face to face with the patient

\*\*\* total minutes spent at this encounter.