

# The Anatomy of a CMT Routine Office Visit Note

Third-party payers, including Medicare, expect to see certain details in the daily visit note when Chiropractic Manipulative Treatment (CMT) is performed. This example outlines the patient-specific elements that properly document the story of your patient's journey through active treatment.

## Subjective:

Daily Encounter: treatment for acute/active care on visit #3 of a projected 20 visits

- Chief Complaint: Reports deep, aching, stiffness type discomfort in the center of the back of the neck; this complaint has generally improved about 10% since the last visit. The patient reported, "the relief lasted quite a while" Sleeping has not improved yet as she was still awakened about every two hours.
  - Pain Scale: 5/10 reported using Verbal or Visual Analog Scale

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- Complaint #2: Reports dull aching type discomfort in the left and right side of the lower back and buttock. The patient did complete the ROM exercises as instructed. Feels about the same as last visit in the lower back, generally throughout the day, but sitting has worsened even more since the last visit, especially in the car.
- Pain Scale: 6/10 reported using Verbal or Visual Analog Scale

## **Objective:**

### **Daily Objective Findings:**

- Spinal Restriction(s)/Subluxation(s): left C3, C4, right C5, L3, L4, right L5, right sacrum and right pelvis
- Compensatory/Incidental Subluxations: T5, T6
- Pain/Tenderness: cervical, cervico-thoracic, upper thoracic, lower lumbar and lumbo-sacral
- Postural Analysis: short left leg (pelvic deficiency), head rotation left, high right shoulder, thoracic hyper-kyphosis and high left hip
- Muscle Spasm(s): hypertonic posterior cervical (neck), left trapezius, upper thoracic right posterior trapezius, mid thoracic, lumbar and left buttock
- ROM Concern(s): cervical extension, lumbar right rotation and lumbar right lateral flexion moderately reduced with pain.

## **Assessment:**

In the early phase of treatment; progress expected as plan progresses; slight worsening of pain after first adjustment is within normal limits and should subside as treatment continues.

#### Plan:

#### **Today's Treatment:**

#### **Primary Treatment:**

- Diversified- Chiropractic Manipulative Treatment (CMT) to the left C3, C4, right C5, L3, L4, right L5, right sacrum and right pelvis spinal level(s).
- Compensatory adjustment(s) at level(s): T5, T6

## **Supportive Therapy**

- Hot Pack: hot moist pack applied to posterior cervical (neck) and lumbar regions for 8 minutes.
- Ultrasound with contact medium applied to posterior cervical (neck) region for 10 minutes at a setting of continuous 100% and at 1.0 W/cm2.
- Low volt EMS, unattended applied to lumbar, left and right sacroiliac regions for 8 minutes.

#### Advised

- Tx Effect: Treatment rendered without incident
- Next Visit: continue with treatment plan as scheduled

- Visit number is clearly indicated
- Location and spinal region is clear
- Changes in function since last visit are clear
- Patient specific functional notes included

#### Objective findings clear for all spinal regions being treated

- Incidental subluxations not related to the complaints are noted
  - PART is clearly indicated for all regions being treated
- Daily assessment is personalized and patient specific
- Chiropractic technique clearly indicated
- Specific segments adjusted are noted
- Compensatory segments addressed are noted separately
- Ancillary services are clearly indicated, with location and details
- Time is documented for all therapies