

Name: _____ Date: _____ Visit #: _____ % Better _____ Und _____ HEP _____ Therapist: _____

Write details of Exercise Technique for Patient Understanding

S:

A: Need Help:
 Step 1, Step 2, Step 3, Step 4, Step 5,
 Step 6, Step 7

P:
Units:

2 Awareness of Issue
 Intensity: (Hi, Med., Low)
 Touch:
 Where: _____
 How: _____
 R.O.M.: (Full, Good, Fair, Poor)
 Speed: (Fast, Med., Slow)

1 Issue of Session: _____
Motion That Makes It Worse: _____ %

3	Exercise or Technique	Bad Side	%	4 Rank	RETEST	5	Re-check Exercise/Technique %	6	Re-check The Issue %	Intensity	Touch	R.O.M.	Speed
										7 B=Better, W=Worse, U=Unchanged			

What did you learn new today? _____
 What do you feel about our session Today? _____