Pediatrics OT Sample Reports © 2009

Includes:

- Progress/ Treatment Note
- Plan of Care
- Initial Evaluation
Occupational Therapy Progress / Treatment Note

Patient Name: Rubble, Bam-Bam  Date: 02/26/07
Medical Record #: 123  DOB: 08/22/00
Account #: 12547  Treating Clinician: Cynthia Morris-Hosking, OTR
Provider: Rehab Clinic of Nashville  Provider #: 25489631

Primary Diagnosis: 02/14/07 783.40 Delayed Motor Development
Other Diagnosis: 04/19/07 781.3 Lack of Coordination

Time In: 10:00 AM  Time Out: 11:00 AM

OT Interventions and CPT Codes Consisted of:

<table>
<thead>
<tr>
<th>CPT Code</th>
<th>Description</th>
<th>Modifiers</th>
<th>Minutes</th>
<th>Units</th>
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<tr>
<td>97003</td>
<td>Occupational Therapy Evaluation</td>
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<tr>
<td>97112</td>
<td>Neuromuscular Reeducation - Therapeutic Procedure - 1+ Areas</td>
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<tr>
<td>97535</td>
<td>Self Care/Home Management Training - Direct contact</td>
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<tr>
<td>97533</td>
<td>Sensory Integrative Technique - Direct contact</td>
<td></td>
<td>30</td>
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</tbody>
</table>

Progressive Exercises:

- Peds - Balloon Volley: 6 min
- Peds - Proprioceptive Push and Pull Activities: 8 min
- Peds - Prone on Elbows Activities: 15 min
- Peds - Theraputty Activities: 6 min soft

Functional Activities:

- Peds - Coloring Activity - Large Crayon: 75%
- Peds - Copying Shapes - Close: 75%
- Peds - Putting on Coat: 75%

Impairment Observations:

Bam-Bam is beginning to exhibit the ability to visually track the balloon across midline separate from his head. He will reach across midline to the left with his right hand for a puzzle piece during prone activity with verbal cuing. Responding well to heavy push/pull activities and was able to remove quarters from the soft theraputty.

Comment:

Hypotonicity and decreased strength in his hands limit his ability to manipulate the buttons of his coat. He is now able to place his arms in the coat with assistance required only to pull around his shoulders.

Current Plan:

Two times weekly

Discharge Planning was Discussed with Patient/Caregiver?

Yes

Patient's response to OT Interventions: Good
Patient's progress toward established goals: Good

Cynthia Morris-Hosking, OTR 02/26/07
State License #: 309
Occupational Therapy

Patient Name: Rubble, Bam-Bam
Medical Record #: 123
Account #: 12547
Provider: Rehab Clinic of Nashville
Provider #: 25489631

Medicare #: N/A
Medicaid #: 55555-5
Certification From: 02/26/07
Service From: 08/24/07

Visits From SOC: 1

Certification To: 04/26/07
Service To: 08/24/07

Primary Diagnosis:
- 02/14/07: 781.3 Lack of Coordination
- 02/14/07: 783.40 Delayed Motor Development

Current Level

Goals

Crawling: Poor proximal stabilization and reciprocal movements noted.
Crawling: Able to crawl with good reciprocal movements and proximal tone.

Prone on Elbows: Unable to hold head up during prone activity for more than 2 minutes.
Prone on Elbows: Able to hold head up during prone activity with good proximal stabilization noted.

Skipping: Unable to skip.
Skipping: Able to skip with fluency.

Self Care Activities: Button coat or shirt, Limited - Minimal assistance with cueing
Self Care Activities: Button coat or shirt, Independent

Self Care Activities: Button and zip pants, Extensive - Moderate assistance
Self Care Activities: Button and zip pants, Limited - Minimal assistance with cueing

School Activities: Coloring, Coloring-cannot stay within boundaries
School Activities: Coloring, Coloring-Fills 50% of image

School Activities: Copying from paper/near, Unable to copy adequately for classroom success
School Activities: Copying from paper/near, Able to copy from near with additional time

Socialization with Parent(s)/Caregiver(s): Interactions with therapist, Child does not spontaneously initiate eye contact
Socialization with Parent(s)/Caregiver(s): Interactions with therapist, Child demonstrates appropriate eye contact to situation

Balance: Maintains balance with one hand stabilization
Balance: Maintain balance with challenge

Fine Motor Coordination: Ineffective hold on scissors during tasks
Fine Motor Coordination: Able to hold scissors effectively

Bilateral Motor Coordination: Difficulty crossing midline during tasks
Bilateral Motor Coordination: Able to cross midline without hesitation during tasks

Gross Motor Coordination: Unable to walk 6 steps heel to toe without loss of balance
Gross Motor Coordination: Able to walk greater than 6 steps heel to toe without loss of balance

Impairment Observations

Bam-Bam demonstrates full active range of motion in all extremities. Hypotonicity and decreased strength limits endurance for age appropriate activities.

Peabody Developmental Motor Scales

<table>
<thead>
<tr>
<th>Stationary</th>
<th>Raw Score</th>
<th>Age Equivalent</th>
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<tr>
<td></td>
<td>42</td>
<td>35 months</td>
<td>5</td>
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</tr>
<tr>
<td>Locomotion</td>
<td>108</td>
<td>24 months</td>
<td>2</td>
<td>4</td>
</tr>
<tr>
<td>Object Manipulation</td>
<td>27</td>
<td>32 months</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>Grasping</td>
<td>42</td>
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The Peabody Developmental Motor Scale is composed of sub-tests that measure the interrelated abilities of a child in early motor development as it relates to gross and fine motor skills. The Gross Motor Quotient (GQM) measures the ability to utilize the large muscle systems of the body to move from place to place and to perform gross motor tasks. High scores are indicative of children with well developed motor abilities who may be described as agile, well coordinated or graceful. Low scores are indicative of children with weak movement and balance skills, and these children may have difficulty learning to crawl, walk, and run, and may be described as uncoordinated or clumsy. The Fine Motor Quotient (FMQ) measures a child's ability to use their hands and arms to grasp and manipulate objects, such as stacking blocks or draw and color. High scores are indicative of well developed fine motor skills and may be described as good with their hands. Low scores are indicative of weak and underdeveloped grasp patterns and poor visual motor skills. These children have difficulty in learning to pick up objects, draw designs, and use hand tools such as eating utensils and pencils.

Bam-Bam's results indicate poor performance below age level in both fine and gross motor tasks.

Muscle Tone

**Location:** Bilateral Shoulder Girdle  
**Muscle Tone:** Hypotonic

**Location:** Trunk  
**Muscle Tone:** Hypotonic

**Muscle Tone Comment:** Demonstrates poor proximal stabilization due to low tone which is interfering with fine and gross motor tasks. Will compensate with stabilization during fine motor tasks.

Grasp Pattern Achieved

**Gross Grasp**

**Dominance**

**Upper Extremity:** Right  
**Lower Extremity:** Not Established

**Eye:** Not Established

**Neuro-Muscular/Neuro-Motor Comment:** Poor dominance establishment indicative of poor hemispheric specialization.

Interventions (CPT Code)

- Occupational Therapy Evaluation 97003
- Sensory Integrative Technique - Direct contact 97533
- Therapeutic Activities - Direct patient contact 97530
- Neuromuscular Reeducation - Therapeutic Procedure - 1+ Areas 97112
- Self Care/Home Management Training - Direct contact 97535

**Frequency of OT:** Three times weekly  
**Duration of OT:** 6 months

Cynthia Morris-Hosking, OTR  
State License #: 309
Patient Information

Address: 1245 Flat Rock Road
Bedrock, Tennessee  37203

Occupation: Child-Play
Gender: Male
Contact Person: Betty Rubble

Physician: Henry Turner, MD
Physician #: 321

# of Approved Visits: 24
Medicare #: N/A
Medicaid #: 55555-5

Rehabilitation Information / History

<table>
<thead>
<tr>
<th>Onset Date</th>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>02/14/07</td>
<td>783.40</td>
<td>Delayed Motor Development</td>
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<tr>
<td>04/19/07</td>
<td>781.3</td>
<td>Lack of Coordination</td>
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Recent Occupational Therapy: School system-within last sixty days

Prior Functional Status: Developmental Delays
Weight Bearing Status: No restrictions
Safety Measures: No safety measures need to be taken at this time
Rehabilitative Prognosis: Good rehab potential to reach the established goals
Mental Status: Alert and oriented in all spheres - cooperative and motivated

Patient is aware of and understands his/her diagnosis and prognosis: Yes
Patient has a history of behavioral health risks: No
Patient is aware of and understands his/her diagnosis and prognosis: Yes

Assessment Method: Clinical Observation; Objective Testing; Parent/Caregiver Interview; Standardized Testing

Case History: Bam-bam is a 6 y.o. boy who was referred to Occupational Therapy due to his parents concerns that he was behind other children his age in motor skills and classroom performance. He is an active young man, and has trouble sitting still and remaining on task during the evaluation.

Gestation History: Bam-bam’s mother reports that she had gestational diabetes during her pregnancy, and had her labor induced at 35 weeks due to the size of the baby. Birth weight was 8.2 pounds and vaginal delivery was uncomplicated. He did stay in the hospital for 10 days due to problems with his lung development.

Education Level: First Grade
School Name: Nanny Berry Elementary School
Communication: Verbal skills functional for evaluation; Learns best through demonstration

Behavior/Cognition: Difficultly participating in standardized testing; Friendly and cooperative; Enjoys therapists attention and interaction; Inability to sustain attention to therapist directed tasks; Difficulty transitioning between activities

Behavior/Cognition Comments: During the evaluation Bam-bam was cooperative and was eager to please. He is easily distracted by external stimuli from the environment and required frequent redirection to remain on task. He tends does best in a quiet room with the blinds on the windows closed, and distractions minimalized. He has difficulty sitting still, and seeks sensory stimuli during challenging tasks. Good effort was demonstrated during all requested activities, however, he continually asked for reinforcement that his performance was satisfactory.
### Areas of Occupation

#### Transitional Movements- Crawling

**Goal Completion Date:** 04/26/07

**Initial:** Poor proximal stabilization and reciprocal movements noted.

**Goal:** Able to crawl with good reciprocal movements and proximal tone.

#### Transitional Movements- Prone on Elbows

**Goal Completion Date:** 04/26/07

**Initial:** Unable to hold head up during prone activity for more that 2 minutes.

**Goal:** Able to hold head up during prone activity with good proximal stabilization noted.

#### Transitional Movements- Skipping

**Goal Completion Date:** 04/26/07

**Initial:** Unable to skip.

**Goal:** Able to skip with fluency.

**Transitional Movement Comments:** Poor coordination and proximal stability noted during all requested tasks. Required frequent visual demonstration and verbal cuing to complete the requested activity. Bam-bam tired easily and became frustrated with challenging tasks, however, was excited and pleased when he was able to complete the activity.

### Self Care Activities

**Goal Completion Date:** 03/26/07

**Activities:** Button coat or shirt

**Initial:** Limited - Minimal assistance with cueing

**Goal:** Independent

**Goal Completion Date:** 04/26/07

**Activities:** Button and zip pants

**Initial:** Extensive - Moderate assistance

**Goal:** Limited - Minimal assistance with cueing

**Self Care Activities Comments:** Bam-bam has difficulty with clothing fasteners due to decreased coordination, tone, and strength in his hands. He is able to dress independently except for buttoning of his coat or shirt and fastening his pants. He would like to be able to button and zip his pants independently so that he can go to the bathroom at school without assistance.

### School Activities

**Goal Completion Date:** 04/26/07

**Activities:** Coloring

**Initial:** Coloring-cannot stay within boundaries

**Goal:** Coloring-Fills 50% of image

**Goal Completion Date:** 04/26/07

**Activities:** Copying from paper/near

**Initial:** Unable to copy adequately for classroom success

**Goal:** Able to copy from near with additional time

**School Activities Comments:** Bam-bam demonstrates close visual monitoring of fingers when he is performing these tasks, suggestive of decreased kinesthetic sensation.
Socialization with Parent(s)/Caregiver(s)

**Goal Completion Date:** 03/26/07

**Activities:** Interactions with therapist

<table>
<thead>
<tr>
<th>Initial</th>
<th>Goal</th>
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<tbody>
<tr>
<td>Child does not spontaneously initiate eye contact</td>
<td>Child demonstrates appropriate eye contact to situation</td>
</tr>
</tbody>
</table>

**Socialization with Parent(s)/Caregiver(s) Comments:**

Bam-Bam does not initiate eye contact when spoken to.

**Assessment**

**Strengths:** Desire to please; Learns well through demonstration; Supportive family network

**Strength Comments:** Bam-bam is very eager to please and participate in therapy. His parents are involved in his therapy and are eager to integrate suggestions and home activities into their daily routines.

**Limitations/Barriers/Areas to Improve:** Decreased bilateral motor skills; Decreased body awareness; Decreased fine motor coordination; Decreased gross motor coordination; Decreased sensory processing skills; Visual motor skill deficits

**Limitations/Barriers/Areas to Improve Comments:** Bam-bam presents with delays in his fine, gross, and bilateral coordination, indicative of deficits in his sensory processing ability.

**Recommended Home Activities:** Activities prone on the floor; Allow extra time for written work; Chucky Cheese playtime; Decrease distraction during activities requiring concentration; Encourage reaching across midline during play; Give praise for participation in tasks; Hanging from bars on swing set; Heavy work tasks-carrying trash barrels, laundry baskets; Limit television and computer/video time; Play the Twister game; Playground play

**Recommended Home Activities Comments:** Parents were instructed in activities that would encourage development of kinesthetic processing and coordination. Recommendations are for physically active play and to limit television and computer/video game time.

**Areas of Occupation - Long Term Goals:**

Child to demonstrate good sensory processing skills to allow for age appropriate school function and motor skills.

Age appropriate self-care skills

**Patient / Caregiver concur with established goals:** Yes

**Performance Skills and Components**

**Peabody Developmental Motor Scales**

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<table>
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<tr>
<th>Grasping</th>
<th>Raw Score</th>
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**GMQ**

66

**FMQ**

61

**TMQ**

60

**Peabody Developmental Motor Scales Comments:**

The Peabody Developmental Motor Scale is composed of sub-tests that measure the interrelated abilities of a child in early motor development as it relates to gross and fine motor skills. The Gross Motor Quotient (GQM) measures the ability to utilize the large muscle systems of the body to move from place to place and to perform gross motor tasks. High scores are indicative of children with well developed motor abilities who may be described as agile, well coordinated or graceful. Low scores are indicative of children with weak movement and balance skills, and these children may have difficulty learning to crawl, walk, and run, and may be described as uncoordinated or clumsy. The Fine Motor Quotient (FMQ) measures a child's ability to use their hands and arms to grasp and manipulate objects, such as stacking blocks or draw and color. High scores are indicative of well
developed fine motor skills and may be described as good with their hands. Low scores are indicative of weak and underdeveloped grasp patterns and poor visual motor skills. These children have difficulty in learning to pick up objects, draw designs, and use hand tools such as eating utensils and pencils.

Bam-Bam's results indicate poor performance below age level in both fine and gross motor tasks.

### Balance

| Position: Standing with hip width stance-eyes closed | Action: Static |
| Initial: Maintains balance with one hand stabilization | Goal: Maintain balance with challenge |

### Fine Motor Coordination

| Activity: Cutting | Tools Used: Adaptive scissors |
| Initial: Ineffective hold on scissors during tasks | Goal: Able to hold scissors effectively |

| Activity: Cutting | Tools Used: Adaptive scissors |
| Initial: Able to pick up ½ inch object with pincer grasp | Goal: Cuts only on a straight line |

| Activity: Picking up small objects, | Tools Used: Beads-1 inch |
| Initial: Uses raking grasp to retrieve small objects | Goal: Able to pick up 1 inch object with pincer grasp |

### Bilateral Motor Coordination

| Activity: Reaching for a large object | Tools Used: Large ball |
| Initial: Difficulty crossing midline during tasks | Goal: Able to cross midline without hesitation during tasks |

### Gross Motor Coordination

| Activity: Heel to toe walking | Tools Used: Not Applicable |
| Initial: Unable to walk 6 steps heal to toe without loss of balance | Goal: Able to walk greater than 6 steps heal to toe without loss of balance |

| Activity: Catch and throw a ball | Tools Used: Ball |
| Initial: Attempts to perform task, but poor motor planning interferes | Goal: Demonstrates good motor planning for task requested |

| Activity: Ascending stairs | Tools Used: Not Applicable |
| Initial: Unable to alternate steps when ascending stairs | Goal: Able to alternate steps when ascending stairs |

### Coordination Comments:
Bam-Bam demonstrates poor proximal stabilization and kineshetics which interfere with his gross motor coordination. Difficulty in bilateral tasks for crossing midline is indicative of poor bilateral integration.
**Muscle Tone**

- **Location**: Bilateral Shoulder Girdle
- **Muscle Tone**: Hypotonic
- **Location**: Trunk
- **Muscle Tone**: Hypotonic

**Muscle Tone Comment**: Demonstrates poor proximal stabilization due to low tone which is interfering with fine and gross motor tasks. Will compensate with stabilization during fine motor tasks.

**Grasp Pattern Achieved**

**Gross Grasp**

- **Dominance**
  - **Upper Extremity**: Right
  - **Lower Extremity**: Not Established
  - **Eye**: Not Established

**Neuro-Muscular/Neuro-Motor Comment**: Poor dominance establishment indicative of poor hemispheric specialization.

**Visual Motor/Visual Perception**

- **Visual Tracking**: Avoids eye contact, Loss of target object at midline when tracking left to right, Hesitates going up and down steps, Does not spontaneously track or look for target object

- **Ocular Convergence/Divergence**: Difficulty recognizing differences in form shape from previous image, Difficulty visually localizing requested object from environment, Sustained visual regard and tracking of caregiver

- **Quick Localization**: Difficulty copying simple shapes on same paper, Watches hand while writing

**Visual Perceptual Tests**

- **Test of Visual Perceptual Skills (TVPS)**
  - **Results**: TEST OF VISUAL PERCEPTUAL SKILLS (4 to 13 years): Visual Discrimination: 4.3 yr Visual Memory: 4.2 yr Visual Spatial Relation: 4.5 Visual Form Constancy: < 4.0 yr Visual Sequential Memory: < 4.0 yr Visual Figure Ground: 4.5 yr Visual Closure: 4.5 yr

**Visual Motor/Visual Perceptual Comments**: Visual perception is the ability to understand and perceive visual input, while visual motor includes both the ability to process the visual information and create an accurate motor response. Ocular motor control is the actual movement of the eye. Bam-Bam demonstrates difficulty with tracking across midline. He is below age level in visual perceptual skills and visual motor skills.

**Visual Motor/Visual Perceptual Goals**: 1- Child to smoothly track target object across midline separately from head movements. 2- Child to be able to copy straight line, circle, and square from near on same paper.

**Somatosensory**

- **Tactile Tolerance**: Complains of labels/tags in clothing, Definite preferences for clothing textures, Dislikes getting hands dirty, Does not like to wear shoes, Intolerant of daily self-care activities

- **Graphesthesia**: Tends to run on playground, but not climb or explore equipment, Poor sequencing of motor tasks

- **Body Awareness**: Avoids crossing midline during tasks, Mixed dominance demonstrated for upper/lower extremities and eyes, Generalized delayed processing, Gravitational insecurity, Joint laxity and instability

- **Kinesthesia/Position in Space**: Avoids climbing or jumping, Child is uncomfortable with play ground activities, Low muscle tone, Seeks deep pressure stimulation

- **Bilateral Integration**: Poor bilateral motor coordination, Will turn body to avoid reaching across midline, Poor balance - trips easily

- **Registration of Sensory Input**: Dislikes noisy items such as vacuum cleaners and lawn mowers, Excessive pressure demonstrated during activities, Easily distracted from task by external stimuli

- **Auditory Processing**: Difficulty understanding nuances of language, Auditory attention - Distractible to irrelevant stimuli

- **Proprioception**: Avoids climbing or jumping, Excessive pressure is used during writing and coloring tasks, Child tends to seek out activities involving proprioceptive input
Self-Regulation/Arousal: Difficulty getting to sleep or staying asleep, Disorganized behaviors, Has difficulty calming after exercise or becoming upset

Self-Stimulatory Behaviors: Self rocking behaviors

Somatosensory Comments: Bam-Bam demonstrates sensory processing deficits which interfere in his daily functioning. He demonstrates sensory intolerance, postural insecurity, low muscle tone, and poor motor coordination indicative of poor kinesthetic feedback and sensory processing. He has difficulty filtering out environmental stimuli which interferes with maximum performance in the school setting. Resistance in crossing the midline of his body during activities and difficulty with bilateral tasks are indicative of poor hemispheric integration and specialization.

Somatosensory Goals: 1- Child to tolerate washing his hands and drying with a rough towel. 2- Child to demonstrate comfort in ascending 4 steps and sliding on slide with hand-held of therapist. 3- Child will spontaneously reach to left of midline with right hand to reach an object during a task. 4- Child will tolerate 10 minutes of activity while prone on elbows. 5- Child to be able to filter out environmental sounds allowing for concentration on task

Impairment Observations
Bam-Bam demonstrates full active range of motion in all extremities. Hypotonicity and decreased strength limits endurance for age appropriate activities.

Interventions (CPT Code)

Occupational Therapy Evaluation 97003
Sensory Integrative Technique - Direct contact 97533
Therapeutic Activities - Direct patient contact 97530
Neuromuscular Reeducation - Therapeutic Procedure - 1+ Areas 97112
Self Care/Home Management Training - Direct contact 97535

Frequency of OT: Three times weekly

Duration of OT: 6 months

Cynthia Morris-Hosking, OTR
State License #: 309