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January 2018 Follow-up Medical Form | Page 1 Follow-
up Medical Form _____ Appointment Date With
Dr. _____ Patient Name This Form Is Used To Gather
Information So That My Doctor Can Maximize The Time
Used To Examine Me And Answer My Questions About
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O Initial Encounter O Subsequent Encounter O Sequela
• Indicate The Cause Of The Injury, Place Of Occurrence, Activity And Patient Status S42.412A Displaced Simple Supracondylar Fracture Without Intercondylar Fracture Of Left Humerus, Initial Encounter For Closed Fracture S42.413A Displaced Simple Supracondylar Fracture Jun 2th, 2024

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Right Arm, Initial Encounter For Closed Fracture

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Parameters •Acute •Chronic •Acute On Chronic

•Recurrent ICD-10-CM Injury Coding For Orthopedics

Example A •Joy Presents For Recheck On Her Gout Of

Her Left Wrist. She States She Has Less Pain And The

Joint Seems To Be More Flexible. Jan 3th, 2024

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Block Flexion At The IPs And Focus Motion At The MCP Joints (reverse Oval 8's Also Work). Dynamic Flexion Assist Splints May Be Used. Continue MCP Flexion To 45° And Begin Light Functional Activities In Dynamic Splint. Finger Walking Mar 3th, 2024

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Rehabilitation Following Total Shoulder Replacement,
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