ARIZONA CENTER FOR
Hand to Shoulder Surgery

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Hand to Shoulder Surgery & Reconstructive Microsurgery • www.achssurgeons.com
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Patient Name:	
Diagnosis:	**DOI:**
Procedure:	**DOS:**

[ ] Evaluation and Treatment

RANGE OF MOTION
[ ] AROM
[ ] AAROM
[ ] PROM
[ ] Blocking___DIP___PIP
[ ] Tendon Gliding
[ ] Specific:

STRENGTHENING
[ ] Isometric
[ ] Progressive Resistive

SENSORY
[ ] Eval & Tx

ADL'S
[ ] Eval & Tx

PRE-FAB SPLINTING
[ ] Wrist [ ] Heelbo
[ ] Thumb Spica [ ] Tennis Elbow
[ ] CMC [ ] Edema Glove
[ ] Stack Splint [ ] 3 Point

HOME EXERCISE PROGRAM
[ ] ROM
[ ] Edema Control
[ ] Strengthening
[ ] CPM
[ ] TENS
[ ] Other:

CUSTOM SPLINTING
[ ] FINGER
Single Digit: THUMB 2 3 4 5
Immobilize DIP PIP
Mallet 1 Splint 2 Splint
Tip Protector_____
Dynamic_____Flexion____Extension

[ ] HAND BASED
CMC_____
Gutter _____Radial_____Ulnar
Intrinsic Plus_____
Thumb Spica____IP Free__IP Include
Dynamic _____Flexion__Extension
Other:

[ ] WRIST SPLINT
___Neutral___Flexion____Extension
Gutter _____Radial_____Ulnar
Thumb Spica__IP Free__IP Include
Functional Position_____
Dynamic ____Flexion___Extension
Include Thumb 2 3 4 5
Other:

[ ] LONG ARM
Elbow 90 Degrees or _____Degrees
Forearm-___Neu___PRO___SUP
Wrist Neutral or ____Degrees
Hinge _____Locked ___Unlocked
_____Restricted ROM
ROM Arc __Degrees to ___Degrees
Other:

MODALITIES
[ ] ALL MODALITIES
[ ] Hot Packs
[ ] Cold Packs
[ ] Parafin
[ ] Ultrasound
[ ] Phonophoresis
[ ] Iontophoresis
[ ] TENS
[ ] CPM
[ ] Massage
[ ] E STIM
[ ] JOBST
[ ] Whirlpool

[ ] Wound Care:

[ ] Edema Control
Coban Digisleeve Edema Glove

[ ] Other:

PRECAUTIONS/INSTRUCTIONS:
FREQUENCY/DURATION_____x wk for _____Weeks [ ] AZ Center for Hand Therapy (ACHT): 602-258-4788

MD Signature_____ DATE/TIME_____