

# PATIENT THERAPY RECORD

1–15 minutes = 1 unit  
16–37 minutes = 2 units  
38–52 minutes = 3 units  
53–67 minutes = 4 units

**"T"**—Therapist not available:  
(1) Ill  
(2) Medical appointment with another child  
(3) Meeting  
(4) Other

**"P"**—Patient not available:  
(1) Ill  
(2) School cancelled  
(3) Parent cancelled  
(4) Failed appointment  
(5) Holiday  
(6) Other

**S**—Patient cooperation was:  
(A) Good  
(B) Fair  
(C) Poor  
  
**O**—Direct/Indirect

**A**—Response to treatment:  
(A) Good  
(B) Fair  
(C) Poor

**P**—Plan:  
(A) Continue  
(B) Modify  
(C) Re-evaluate  
(1) MTU conference  
(2) Private  
(3) CCS special center

Month:		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Total			
DIRECT	S.																																			
	O: Treatment																																		A	
	Evaluation																																			B
	Case conference																																			C
	Field visit																																			D
INDIRECT	Mileage																																			E
	Consultation																																			F
	Documentation																																			G
	Other																																			H
A:																																				
P:																																				

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Signature(s) \_\_\_\_\_ Date \_\_\_\_\_

<input type="checkbox"/> Physical Therapy <input type="checkbox"/> Occupational Therapy	Treatment diagnosis	Primary diagnosis			
Patient name	Date of birth	Social security number	MTU and county number	CCS number	
Year	Quarter	Medical direction	County of legal residence	Therapy D/C	