# Osteopathic Musculoskeletal Examination

**Patient’s Name:**

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**Subjective:**

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**Vitals:**

- T ________
- B/P ________
- H ________
- R ________
- Pulse ox ________

**Date/Time:**

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**Initial Visit**

- □ F/u
- □ Pain level _______ / 10
- WT: _______
- HT: _______

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**Required**

**For Coding Purposes Only**

- Ant./Post. Spinal Curves:
  - Cervical Lordosis
  - Thoracic Kyphosis
  - Lumbar Lordosis

- Scoliosis (Lateral Spinal Curves):
  - None
  - Functional
  - Mild
  - Moderate
  - Severe

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**Plan:**

- OMT Performed
- ART BMT 1-2 Reg 98925
- ST MFR ME 3-4 Reg 98926
- ART SCS HVLA 5-6 Reg 98927
- BLT BD FPR 7-8 Reg 98928
- CR VIS LYMPH > 9 Reg 98929

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**Assessment Tools:**

- **Region Evaluated**
  - **Severity**
    - 0
    - 1
    - 2
    - 3

- **Specific of Major Somatic Dysfunctions**

<table>
<thead>
<tr>
<th>Region Evaluated</th>
<th>Severity</th>
<th>Specific of Major Somatic Dysfunctions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Head</td>
<td>0 0 0 0</td>
<td></td>
</tr>
<tr>
<td>Neck</td>
<td>0 0 0 0</td>
<td></td>
</tr>
<tr>
<td>Thoracic T1 - 4</td>
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</tr>
<tr>
<td>T5 - 9</td>
<td>0 0 0 0</td>
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<tr>
<td>T10 - 12</td>
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</tr>
<tr>
<td>Lumbar</td>
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<td></td>
</tr>
<tr>
<td>Pelvis/Sacrum</td>
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<td></td>
</tr>
<tr>
<td>Pelvis/Innominate</td>
<td>0 0 0 0</td>
<td></td>
</tr>
<tr>
<td>Extremity (lower)</td>
<td>R L 0 0 0 0</td>
<td></td>
</tr>
<tr>
<td>Extremity (upper)</td>
<td>R L 0 0 0 0</td>
<td></td>
</tr>
<tr>
<td>Ribs</td>
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<td></td>
</tr>
<tr>
<td>Other</td>
<td>0 0 0 0</td>
<td></td>
</tr>
</tbody>
</table>

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**Neuro:**

- DTR _ / 4
- MS _ / 5

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**Major Correlations with:**

- Traumatic
- Orthopedic
- Neurological
- Primary Mus-Skl
- ADLs
- Rheumatological
- Cardiovascular
- Pulmonary
- Gastrointestinal
- Viscerosomatic
- Congenital
- EENT
- Other
- Genitourinary

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**Assessment:**

- Head/cranial somatic dysfunction 736.0
- Cervical 739.1
- Ribs: 739.8
- Thoracic 739.2
- Abd / Other 739.9
- Lumbar 739.3
- Sacral 739.4
- Pelvic 739.5
- Lower Extremity 739.6
- Upper Extremity 739.7

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**Severity Key:**

- 0 = No SD or background (BG) levels
- 1 = Minor TART
- 2 = TART more than BG levels
- 3 = TART obvious (R & T esp)
- +/ - symptoms
- = Symptomatic, R and T very easily found, "key lesion"

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**Improved □ Unchanged □ Worse □**

**Comments:**

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**Comments:**

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**Treatment time: ______ min, F/u appt ______**

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**Signatures:**

- Intern / Resident: __________________________
- Attending: _______________________________