Client Medical Form 2020

To be completed by a physician or occupational therapist

Physician Assessment of Client

PHYSICAL: Please note the range of motion, strength, coordination, spasticity, balance etc.

Upper extremities ______________________ Lower extremities ______________________

Mobility ______________________ Sitting/Standing balance ______________________

Braces/other equipment ______________________ Precautions/Comments ______________________

Speech ______________________ Hearing ______________________

Vision ______________________ Other ______________________

MENTAL STATUS: Please indicate cognitive ability and capability

Comprehension ______________________

Overall Attitude ______________________

Client Profile

____
CLIENT'S FULL NAME

______________ ______________
HEIGHT (FT) WEIGHT (LBS)

____
DIAGNOSIS

____
DATE OF ONSET

____
HISTORY OF SEIZURES (if any)

____
MEDICATIONS & PRECAUTIONS

____

____

PHYSICIAN'S CONSENT

____
PHYSICIAN'S NAME

____
PHYSICIAN'S SIGNATURE

______________ ______________
PHYSICIANS OFFICE # DATE OF ASSESSMENT

Does the X-ray show a negative diagnostic X-ray for Atlanto-Axial instability? ______

☐ I agree that this is a beneficial form of therapy for my patient.

I, ______________________ (physician's name) hereby deem that ______________________ (client's name) is medically cleared to ride horses and it will not be detrimental to their health provided that riding is done in a safe and supportive environment.

Atlanto-Axial X-Ray Verification for Clients who present with <u>Down Syndrome</u>

NOTE: Due to the nature of riding, persons diagnosed with Down Syndrome cannot be accepted for riding instruction without proof of a negative diagnostic X-ray for atlanto-axial instability. The form must be accompanied by a signed and dated statement from a qualified physician giving the date and result of the diagnostic X-ray.

____
CLIENT'S FULL NAME

____
PHYSICIAN'S NAME

______________ ______________
PHYSICIANS OFFICE # DATE OF X-RAY

Does the X-ray show a negative diagnostic X-ray for Atlanto-Axial instability? ______