

SOAP Note Practice Worksheet

Use the randomly listed information below to create a patient's SOAP notes. Place the listed information in the correct SOAP boxes, in the order in which you think the information would have come up during an evaluation. In addition, translate all applicable terms/anatomy into their abbreviated/shorthand/symbol format.

1. Patient reported to sideline during football practice, holding left arm against his body
2. Tender to palpation around the entire left shoulder joint
3. Referred patient to team physician
4. The patient described having a tingling sensation down his left arm when the injury first occurred, but has since resolved
5. Left anterior shoulder dislocation
6. Some muscle spasms felt within the deltoid, pectoralis major and rotator cuff muscles; no other palpable deformity detected
7. Radial pulse in left hand was normal when compared bilaterally
8. Placed patient in sling for comfort and transport
9. Chief complaints are pain and weakness in their left arm
10. Left hand grip strength somewhat decreased (4/5) compared bilaterally
11. Patient reported the injury occurred during a tackling drill
12. No prior history of shoulder pathologies in either shoulder
13. Applied ice to area for twenty minutes
14. The patient's shoulder range of motion and strength were not examined as any movement increased his symptoms
15. The patient stated, "It felt like my shoulder popped out after the tackle. When I tried to stand up, it popped again and then it didn't hurt as bad."
16. With the help of a coach, the patient's shoulder pads were removed to reveal no visible deformity
17. Team physician ordered a magnetic resonance image be taken of the patient's shoulder to rule out soft tissue involvement secondary to the dislocation



Subjective: 11. Pt reported the injury occurred during a tackling drill. 15. The pt stated, "It felt like my shoulder popped out \bar{p} the tackle. When I tried to stand up, it popped again and then it didn't hurt as bad." 9. CC (or C/C) are pn and weakness in their \textcircled{L} arm. 12. No prior hx of shoulder pathologies in either shoulder. 4. The pt described having a tingling sensation down his \textcircled{L} arm when the injury first occurred, but has since resolved. 2. Tender to palpation around the entire \textcircled{L} shoulder jt.

11, 15, 9, 12, 4, 2

Objective: 1. Pt reported to the sideline during football practice, holding \textcircled{L} arm against his body. 16. \bar{c} the help of a coach, the pt's shoulder pads were removed to reveal no visible deformity. 6. Some mm spasms felt within the deltoid, pectoralis major and rotator cuff mm; no other palpable deformity detected. 14. The pt's shoulder ROM and strength were not exam (or Ex) as any mvt \uparrow his sy. 10. \textcircled{L} hand grip strength somewhat \downarrow (4/5) compared \textcircled{B} . 7. Radial pulse in \textcircled{L} hand was normal when compared \textcircled{B} .

1, 16, 6, 14, 10, 7

Assessment: 5. \textcircled{L} ant shoulder dislocation

Plan: 13. Applied ice to area for 20'. 8. Placed pt in sling for comfort and transport. 3. Referred pt to team physician. 17. Team physician ordered an MRI to be taken of the pt's shoulder to RO (or R/O) soft tissue involvement secondary to the dislocation.

13, 8, 3, 17