**Occupational Therapy DOCUMENTATION GRID**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | date | date | date | date | date | date | date | date | date | date |
| *Day of Eval: check one complexity level* |  |  |  |  |  |  |  |  |  |  |
| *Eval* 97165*: Low Complexity* |  |  |  |  |  |  |  |  |  |  |
| *Eval 97166: Mod Complexity* |  |  |  |  |  |  |  |  |  |  |
| *Eval 97167: High Complexity* |  |  |  |  |  |  |  |  |  |  |
| *Re-Evaluation 97168:* |  |  |  |  |  |  |  |  |  |  |
| *Enter Visit time next to CPT Code:*  *1 unit = 15 minutes. On day of eval too* |  |  |  |  |  |  |  |  |  |  |
| **97110 Therapeutic Exercise**  Strength and Endurance, ROM,  Muscle F lexibility (for specific skill) |  |  |  |  |  |  |  |  |  |  |
| **97112 Neuromuscular Reeducation** |  |  |  |  |  |  |  |  |  |  |
| Balance, Coordination, Posture, Kinesthetic sense, Proprioception for sitting and standing (for Re-Ed) |  |  |  |  |  |  |  |  |  |  |
| **97116 Gait Training** |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
| **97140 Manual Therapy Techniques** |  |  |  |  |  |  |  |  |  |  |
| Myofacial Release, Mobiliz, Manip. |  |  |  |  |  |  |  |  |  |  |
| **97530 Therapeutic Activities** |  |  |  |  |  |  |  |  |  |  |
| DO NOT USE WITH TRI CARE INSURANCE  Dynamic activities to improve funct. Perf.; Motor Planning; Seque. multi step |  |  |  |  |  |  |  |  |  |  |
| Activ; Visual perceptual activites |  |  |  |  |  |  |  |  |  |  |
| **97127 (ins)/ G0515 (MC)**  **Development of cognitive skills** |  |  |  |  |  |  |  |  |  |  |
| MEDICARE: ONE UNIT ONLY. INSURANCE: USE 95112 or 97530 UNTIL FURTHER GUIDANCE AVAILABLE  To improve attention, memory, problem solving, sequencing, Visual motor skills |  |  |  |  |  |  |  |  |  |  |
| **97533 Sensory Integrative techniques** |  |  |  |  |  |  |  |  |  |  |
| INSURANCE: THIS CODE NOT AVAIL FOR ALL  Integration, Regulation, postural security |  |  |  |  |  |  |  |  |  |  |
| Promote adaptive responses, Processing; |  |  |  |  |  |  |  |  |  |  |
| Vestib., Proprio., Tact., Aud., & Visual |  |  |  |  |  |  |  |  |  |  |
| **97535 Self-care/Home manag train’g** |  |  |  |  |  |  |  |  |  |  |
| ADL & compensatory training  Instructions in use of adaptive technolog |  |  |  |  |  |  |  |  |  |  |
| **97537 Community/work reintegration** |  |  |  |  |  |  |  |  |  |  |
| Shopping, transportation, vocational activities, use of assistive technology |  |  |  |  |  |  |  |  |  |  |
| School/Home/Community Visit |  |  |  |  |  |  |  |  |  |  |

VISIT NOTE SUMMARY (for these days if daily note not provided)