# SOAP Note for Occupational Therapy Template

## Client Information

| First Name | Last Name |
|---|---|
| John | Sample |

| Date of Birth | Date |
|---|---|
| 10/15/1965 | 11/22/2022 |

## Subjective

John is a 55-year-old farmer who lives rurally with his wife and sons.

John injured the palm of his left-hand four months ago operating farm machinery and underwent emergency surgery that night on the damaged tendons in his hand.

He no longer uses a brace and is seeking occupational therapy to assist with driving, preparing food and dexterity.

## Objective

Mild tenderness upon palpation of left palm.

Grip strength 44 lbs.

Scar appears well healed with callouses around surgical site.

## Assessment

John is ready to begin targeted exercises to aid in his driving ability, particularly handling a steering wheel, and dexterity.

## Plan

Provided resistive grip and pinch exercises x3 with visual guide for completion.

Weekly sessions and review of frequency in one month.

Signature

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