

Patient Treatment Record Example for POOL

Patients Name					Date	Disclaimer Agreed Yes / No
Session Number					Pool times	
Hydrotherapist						
Motivators					Treadmill times -Water depth -Speed	
Additional equipment						
Aid	XXS	XS	S	M	L	XL
Post Session	Shower		No shower	Blaster	Towel Dry	Shampoo
Previous Tx comments						
Arrival into clinic						
O/ Comments						
HC – Harness fit- Warm up Shower- Pool entry -						
TX						
Topline/ Head and Tail carriage						
Fore Limbs -						
Hind limbs -						
Handling methods						
Recovery/ Balance/ Massage						
Pool exit - Shower down – Post Tx-						