

Occupational Therapy Professional Services Log

Student name: _____ Student #: _____ MA # / Client ID #: _____ DOB: _____

School district: _____ Service month/year: _____

Provider name (print): _____ NPI #: _____

Service date	Time in	Time out	Total time <i>in minutes</i>	CPT code	Progress code	Treatment notes

Provider and Supervisor (if applicable) signature required below.

Provider's signature: _____ Title: _____ Date: _____

Supervisor's signature: _____ Title: _____ Date: _____

CPT codes	Progress codes
Please see reverse	1. Same 2. Requires assistance when working toward objective(s) 3. Is progressing toward objective(s) 4. Mastery of objective(s)

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CPT codes

- 95851** – Range of motion measurements and report (separate procedure); each extremity (excluding hand) or each trunk section (spine)
- 95852** – Range of motion measurements and report (separate procedure); hand, with or without comparison with normal side
- 97003** – Occupational therapy evaluation (***Do not use this code for service dates after 1/1/17**)
- 97004** – Occupational therapy re-evaluation (***Do not use this code for service dates after 1/1/17**)
- 97110** – Therapeutic procedure, one or more areas, each 15 minutes; therapeutic exercises to develop strength and endurance, range of motion and flexibility
- 97112** – Therapeutic procedure, one or more areas, each 15 minutes; neuromuscular reeducation of movement, balance, coordination, kinesthetic sense, posture, and/or proprioception for sitting and/or standing activities
- 97150** – Therapeutic procedure(s) group (2 or more individuals); Note: Group therapy procedures involve constant attendance of the physician or therapist, but by definition do not require one-on-one patient contact by the physician or therapist
- 97165** – OT eval low complex, 30 minutes
- 97166** – OT eval mod complex, 45 minutes
- 97167** – OT eval high complex, 60 minutes
- 97168** – OT re-eval est plan care
- 97530** – Therapeutic activities, direct (one-on-one) patient contact by the provider (use of dynamic activities to improve functional performance), each 15 minutes
- 97532** – Development of cognitive skills to improve attention, memory, problem-solving (includes compensatory training), direct (one-on-one) patient contact by the provider, each 15 minutes
- 97533** – Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact by the provider, each 15 minutes
- 97535** – Self-care/home management training (*e.g.* activities of daily living [ADL] and compensatory training, meal preparation, safety procedures, and instructions in use of assistive technology devices/adaptive equipment), direct one-on-one contact by the provider, each 15 minutes
- 97537** – Community/work reintegration training (*e.g.* shopping, transportation, money management, avocational activities and/or work environment/modification analysis, work task analysis, use of assistive technology device/adaptive equipment), direct one-on-one contact by provider, each 15 minutes
- 97542** – Wheelchair management (*e.g.* assessment, fitting, training) each 15 minutes
- 97750** – Physical performance test or measurement (*e.g.* musculoskeletal functional capacity), with written report, each 15 minutes
- 97755** – Assistive technology assessment (*e.g.* to restore, augment or compensate for existing function, optimize functional tasks and/or maximize environmental accessibility), direct one-on-one contact by provider, with written report, each 15 minutes
- 97760** – Orthotic management and training, each 15 minutes
- 97761** – Prosthetic training, each 15 minutes
- 97762** – C/o for orthotic/prosth use, each 15 minutes