

Jacque Maroun, PT  
Anna Cho, MPT

# ADVANTAGE PHYSICAL THERAPY

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[www.AdvantagePTonline.com](http://www.AdvantagePTonline.com)

Lynn Watkins, PT, OCS  
Irene Froesch, PTA

Patient: \_\_\_\_\_

Diagnosis: \_\_\_\_\_

Special Instructions / Precautions: \_\_\_\_\_

- |  |   |
|--|---|
| <input type="checkbox"/> Evaluate and Treat                | <input type="checkbox"/> Traction (Manual / Mechanical)         |
| <input type="checkbox"/> Therapeutic Exercise              | <input type="checkbox"/> Electrical Stimulation / Iontophoresis |
| <input type="checkbox"/> Hot Pack / Cold Pack              | <input type="checkbox"/> Manual Therapy / Joint Mobilization    |
| <input type="checkbox"/> Ultrasound / Phonophoresis /LASER | <input type="checkbox"/> Balance Activities / Gait Training     |
| <input type="checkbox"/> Neuromuscular Re-Education        | <input type="checkbox"/> Posture / Body Mechanics               |
| <input type="checkbox"/> Pelvic Rehabilitation             | <input type="checkbox"/> Lymphedema                             |
| <input type="checkbox"/> Hand Therapy                      |   |

Treat: \_\_\_\_\_ times weekly for \_\_\_\_\_ weeks.

Prescribing Doctor: \_\_\_\_\_ NPI: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

