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*Conveniently located in the Graybar Building, adjacent to Grand Central Terminal.*

DATE \_\_\_\_\_

PATIENT'S NAME \_\_\_\_\_ AGE \_\_\_\_\_

REFERRING PHYSICIAN \_\_\_\_\_ PHONE (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_

DIAGNOSIS:

ICD-9:

\_\_\_\_\_  
1 2 3 4 5 X WEEK for 1 2 3 4 5 6 7 8 WEEKS

SPECIAL INSTRUCTIONS:

\_\_\_\_\_  
\_\_\_\_\_

### MODALITIES

- Ultrasound
- Phonophoresis
- Iontophoresis
- Dexamethasone dosage \_\_\_\_\_
- Hot packs
- Cold packs/Cryotherapy
- Electrical stimulation
  - TENS
  - HiVolt
  - NMES

### THERAPEUTIC EXERCISE

- PROM
- AAROM
- AROM
- PRE's
- Scapular stabilization exercises
- Lumbar stabilization exercises
- Stretches
- McKenzie extension exercises
- Williams' flexion exercises
- Proprioceptive exercises
- Agility exercises
- Plyometrics

### EXERCISE MACHINES

- Treadmill
  - Walking
  - Running
- Stationary bicycle
- Recumbent bicycle
- Elliptical machine

### THERAPEUTIC ACTIVITIES

- Neuromuscular re-education
- Gait Training
- Posture Re-education
- Body Mechanics Instruction
- Home Exercise Program
- McConnell Taping

### \_\_\_ CUSTOM ORTHOTICS

### \_\_\_ JOINT MOBILIZATION

### \_\_\_ SOFT TISSUE MOBILIZATION

### TRACTION

- Cervical
- Lumbar
- Manual
- Mechanical

REFERRING PHYSICIAN SIGNATURE \_\_\_\_\_