



PORTLAND

94 Auburn St.
Suite 103
Portland, ME 04103
207.797.7578 tel
207.797.8165 fax

www.portcitypt.com

Date: _____

Name: _____

Diagnosis: _____

Surgical Procedure: _____

Date of Surgery: _____

TREATMENT PROCEDURES

EVALUATE & TREAT

MODALITIES

- Ultrasound
- Electrical Stim/TENS
- Iontophoresis using dexamethasone
- Range of Motion
- Flexibility Exercises
- Strengthening Exercises
- Patellofemoral Rehab
- Rotator Cuff Rehab
- Spine Stabilization
- ACL Protocol
- Gait Training

- Functional Mobility Training
- Home Exercise Program
- Aquatics Program
- Isernhagen Functional Capacity Evaluation
- Pre-natal/Post-partum Program (Portland only)

MANUAL THERAPY

- Joint Mobilization
- Soft Tissue Mobilization
- Manual Traction

Other: _____

TREATMENT FREQUENCY: _____ x/week DURATION: _____ weeks

Therapist's Discretion

ADDITIONAL COMMENTS: _____

I certify the above services are required by this patient on an outpatient basis.

Physician's Signature

UPIN #

DO NOT EMAIL PRESCRIPTION The electronic prescription form is provided for your convenience. With respect to responding to this form, please do not send the prescription via email. Please populate, print and sign a hardcopy that may be faxed, mailed or hand delivered to the clinic.

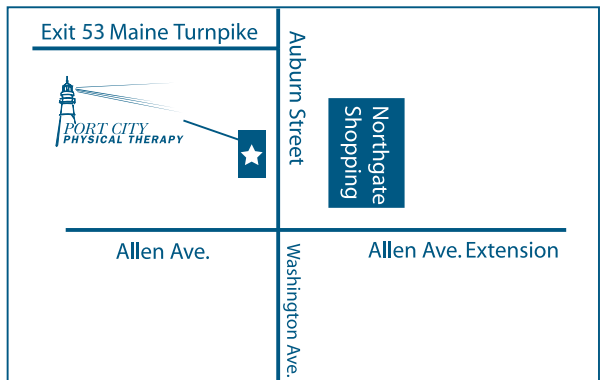


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PORTLAND LOCATION

From Exit 53 Maine Turnpike:
Turn right onto Route 100 South and travel 2 miles to 94 Auburn Street.

From Portland:
94 Auburn Street is directly across from Northgate Shopping Center.



Port City Physical Therapy is featured on

PTandMe.com

*An informational site for patients interested
in or considering physical, occupational, and/or hand therapy.*

ORTHOPEDIC & INDUSTRIAL REHABILITATION SERVICES