



12900 NE 180th Street, Suite 110
Bothell, WA 98011
P: 425.483.4270
F: 425.483.4268
www.flexpt.com

Date: _____

Name: _____

DOB: _____

Phone No.: _____

Diagnosis/ICD-10: _____

Precautions: _____

Procedures:

- ROM Passive/Active
- Conditioning/Strengthening
- Stabilization
- Core Strengthening
- Body Mechanics Training
- Posture Re-Training
- Joint Mobilization
- Soft Tissue Mobilization
- Gait training

Specialty Services:

- Pelvic Floor Therapy
- Pregnancy/Post Partum Related Pain
- Pilates
- Graston® Technique (instrument assisted soft tissue mobilization)

Modalities: _____

Other: _____

- Evaluate and treat at therapist's discretion

Frequency and Duration: _____ times per week for _____ weeks.

Physician's Signature: _____