



North Tahoe Physical Therapy

Lakeside Medical & Professional Building
889 Alder Ave. Suite 105 Incline Village, NV 89451
PH 775-831-6600 Fx 775-831-6697

Name _____ Date _____
Phone _____
Diagnosis _____

Evaluation and Treatment For:

____ Hip ____ Shoulder ____ Cervical ____ TMJ
____ Knee ____ Elbow ____ Thoracic ____ Pelvic Floor
____ Ankle ____ Wrist/Hand ____ Low Back ____ Headache
____ Other _____

Manual Therapies (Myofascial Release/Cranio Sacral/Etc.) _____

Modalities _____

Other Instructions _____

Frequency _____ Times per week for _____ Weeks _____

Physician Signature _____



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