



PHYSICAL THERAPY SPECIALIST

PHYSICIAN REFERRAL

Clinics

**Physical Therapy
Specialist**
1625 W Hwy 88, Suite
302
Minden, NV 89423
(775) 782-4422

Patient's Name: _____

Diagnosis: _____

Precautions: _____

- ☐ Evaluate and Treat
- ☐ Home Program
- ☐ Work/Functional Conditioning
- ☐ Therapeutic Exercise
- ☐ Modalities
- ☐ Other _____

Comments: _____

Frequency: ____ x week ____ weeks or ____ visits total

Signature: _____

Date: _____