NORTH PLATTE PHYSICAL THERAPY

Jessica Mangus, DPT,WCC,OCS
Nikolai Breitkopf, MSPT
Trenton Neill, DPT,CSCS

1900 converse Ave.
Cheyenne. WY 82001
(307) 514-2411 • Fax (307) 514-2392

Skylar Miller, PTA
Rachel Hamilton, PTA
Gracie Goldhammer. PTA
Devin Wright, PTA

PHYSICAL / OCCUPATIONAL THERAPY REFERRAL

Patient's Name: _____ Date of Birth: _____

Address: _____

Diagnosis: _____

Referring Physician: _____ Code: _____

Onset Date: _____ Patient Aware of Dx: Yes No

TREATMENT DESIRED

Evaluate and Treat	Therapeutic Exercise	Manual Therapy
Modalities	AROM	Soft Tissue
Hot/Cold Pack	PROM	Joint Mobilization
Ultrasound/Phonophoresis	Strengthening	Other
Electrical Stimulation	Stretching	Graston/ASTYM/IAMT
TENS	Pool	Hand Program
Iontophoresis	Gait Training	Splint/Orthotic Fabrication
Paraffin/ Cupping	Lifting/Posture Instruction	Functional Capacity Evaluation
Traction	Home Exercise Program	Work Site Evaluation
Functional Dry Needling	Strapping / Kinesiotape	Work Hardening/Conditioning

Special Instructions: _____

Pt discharge: _____ Discharge Date: _____

Reason for discharge: _____

Frequency: _____ Duration: _____

Goals _____

Precautions _____

Date _____ Signature X _____