

Please FAX PRESCRIPTION to 946-9559 and we will schedule the patient



HANDS-ON Physical Therapy

Orthopedics, Sports-Injuries & Women's Health

Ala Moana Building, 1441 Kapiolani Bvd Suite 1113 * Honolulu HI 96814 * Phone: 808-218 3660 Fax: 808-946 9559
handsonpt@mac.com www.hawaiihandson.com Office Hours: 7am -7pm Monday to Saturday

PHYSICAL THERAPY PRESCRIPTION

Name Last First

DOB

Diagnosis/ICD-10 code

Date of onset/surgery

Insurance of patient

Frequency/ # of visits times per week / Total of visits or **Cash Paying patient**

EVALUATE & TREAT

CONTINUATION OF PT

MODALITIES & OTHER SUPPLIES

MANUAL THERAPY

THERAPEUTIC EXERCISE & REHABILITATION

EMG Biofeedback

Joint mobilization

ROM (active, active assisted, passive)

Electrical stimulation

Lumbar spine mobilization

Progressive Resisted / Strengthening

Ultrasound

Cervical spine mobilization

Lumbar Stabilization / Core strengthening

Hot / Cold packs

Thoracic spine mobilization

Proprioception & Balance training

Home Tens unit

Sacro-iliac joint

Gait training

Customized Orthotics

Soft Tissue/ Myofascial release

Home exercise program

McConnell /KT Taping

Traction

Posture evaluation/education

Back Support Pillow

Other.....

Pelvic Floor Program

Special Instructions / Recommendations:

Date

Physician Signature:

Physician Name:

Patient's phone number(s) for scheduling: (C)..... (H)