

Patient: \_\_\_\_\_ Phone: \_\_\_\_\_ DOB: \_\_\_\_\_

Doctor: \_\_\_\_\_ Dr. Phone: \_\_\_\_\_ ICD: \_\_\_\_\_

Diagnosis: \_\_\_\_\_ Precautions: \_\_\_\_\_

**Physical Therapy Referral**

Duration: \_\_\_\_\_ /week x \_\_\_\_\_ weeks

Home Program

△ Evaluate and customize a program based on individual's needs

**Orthopedic/Sports**

- △ E-Stim: IFES, TENS, Pre-Mod, NMES
- △ Gait Training/Balance
- △ Joint Mobilization
- △ Proprioception
- △ Range of Motion (PROM, AROM, AAROM)
- △ Sport Specific Training
- △ Therapeutic Exercise (Strength/PRE)
- △ Total Joint Program (Pre/Post)
- △ Traction (Lumbar, Cervical)

**Functional Rehabilitation**

- △ Activities of Daily Living (ADLs)
- △ Adaptive Equipment
- △ Gait Training/Balance
- △ LE Coordination/Strengthening
- △ Neuromuscular Re-Education
- △ Orthotic/Prosthetic Training
- △ Physical Therapy
- △ Transfer Training
- △ UE Coordination/Strengthening

**Aquatic Therapy**

- △ Gait Training/Balance
- △ Therapeutic Exercise

**Other Programs**

- △ Pilates
- △ Prenatal/Post Natal

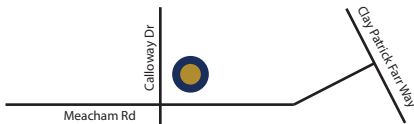
Comments: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# PICK A LOCATION THAT IS CONVENIENT FOR YOU!

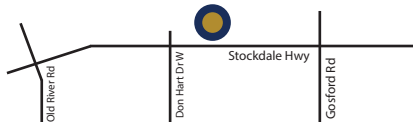
## Rosedale

3400 Calloway Dr, Suite 603, Bakersfield



## Stockdale

8800 Stockdale Hwy, Suite 150, Bakersfield



## Westwind

1800 Westwind Dr, Bldg 500, Bakersfield



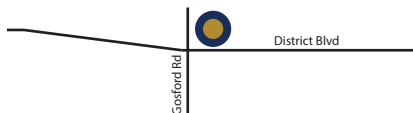
## Allen

13019 Stockdale Hwy, Suite 500, Bakersfield



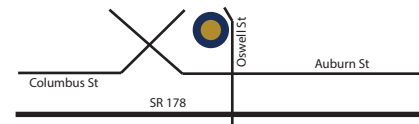
## Southwest

7900 District Blvd, Suite A, Bakersfield



## Northeast

2838 Oswell St, Bakersfield



## Northwest

11206 Olive Dr, Suite 102, Bakersfield



## TERRIOKids

7737 Meany Ave. Suite B5, Bakersfield



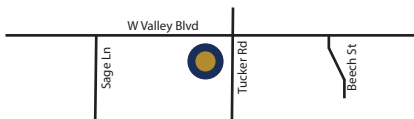
## Panama

4004 Panama Ln, Suite 100, Bakersfield



## Tehachapi

815 Tucker Rd, Suite C, Tehachapi



## Delano

1430 High St, Delano

