



PHYSICAL & OCCUPATIONAL THERAPY

- Great Neck Office:** **In-Home:** **Farmingdale Office:**
 Physical Therapy
 Occupational Therapy

475 Northern Boulevard, #11
Great Neck, NY 11021
Tel. (516) 829-0030
Fax. (516) 466-7723

Servicing: Queens,
Nassau & Suffolk County
Tel. (516) 829-0030
Fax. (516) 466-7723

309 North West Drive
Farmingdale, NY 11735
Tel. (516) 420-2900
Fax. (516) 420-2908

Patient's Name: _____ Date: _____

Diagnosis: _____

Precautions: _____

- | | |
|--|--|
| <input type="checkbox"/> PT Eval & Treat | <input type="checkbox"/> OT Eval & Treat |
| <input type="checkbox"/> Functional Exercise | <input type="checkbox"/> Vestibular |
| <input type="checkbox"/> Balance/Coordination Training | <input type="checkbox"/> Manual Therapy |
| <input type="checkbox"/> Post-op | <input type="checkbox"/> Gait Training/ Analysis |
| <input type="checkbox"/> ADL Training/Safety | <input type="checkbox"/> Home Safety Evaluation |
| <input type="checkbox"/> Assistive Device Fitting/Training | <input type="checkbox"/> Return to Sport/Work |
| <input type="checkbox"/> Conditioning/ Strengthening | <input type="checkbox"/> Early Development PT |
| <input type="checkbox"/> Neuro-Muscular Retraining | <input type="checkbox"/> Anti Gravity Treadmill |
| <input type="checkbox"/> Pulmonary Rehab | <input type="checkbox"/> Laser |
| <input type="checkbox"/> Cardiac Conditioning | <input type="checkbox"/> TMJ |
| <input type="checkbox"/> Therapeutic Exercise (AAROM/
AROM/ PROM) | <input type="checkbox"/> Normatec |
| <input type="checkbox"/> VR Treadmill/ Balance | <input type="checkbox"/> Modalities: _____ |
| | <input type="checkbox"/> Other: _____ |

Frequency/Duration: _____ times a week for _____ weeks

MD Signature: _____

MD Print Name: _____

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