

YOUR PHYSICAL THERAPY PLAN OF CARE

Your physical therapist will perform an evaluation which will include a medical history and a history of the problem for which you are currently seeking treatment.

Based on the information provided by the evaluation, the therapist will devise a treatment program tailored to your specific rehabilitation needs.

Your program may include any of the following treatments:

97110	Therapeutic Exercise to increase strength, endurance, range of motion and/or flexibility.
97112	Neuromuscular Re-education to improve posture, alignment, balance, co-ordination, proprioception, kinesthetic awareness and/ or joint stability.
97116	Gait Training to improve balance, safety, gait pattern for walking, gait pattern for running, and/or use of an assistive device
97140	Manual Therapy to improve joint alignment, joint/soft tissue integrity and/or segmental joint mobility. Manual therapy to decrease pain, joint/tissue edema, and/or spasm.
97530	Therapeutic Activities to improve functional activities such as reaching, carrying, lifting, pushing, pulling, kneeling, bending, sitting, squatting, walking, running and/or stairs.
97010	Heat therapy or cold therapy to decrease pain and/or edema or to increase muscle relaxation and/or circulation
97035	Ultrasound to decrease pain and/or edema or to increase circulation
97014	E-Stimulation to decrease pain and/or edema or to increase muscle relaxation, muscle facilitation and/or circulation.
	Patient Education in posture, ergonomics and body mechanics and to increase the patient's knowledge of their condition for proper self management and safety and to increase independence in functional activities.

<hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/> Patient signature	I AGREE TO THE PLAN OF CARE AS OUTLINED ABOVE.
Date	