



760 Highland Oaks Drive
Winston-Salem, North Carolina 27103-7105
(336) 659-8634 Fax (336) 659-8636
www.wcpta.net

Patient Name _____ Date _____

Dx _____

Physical Therapy Rx:

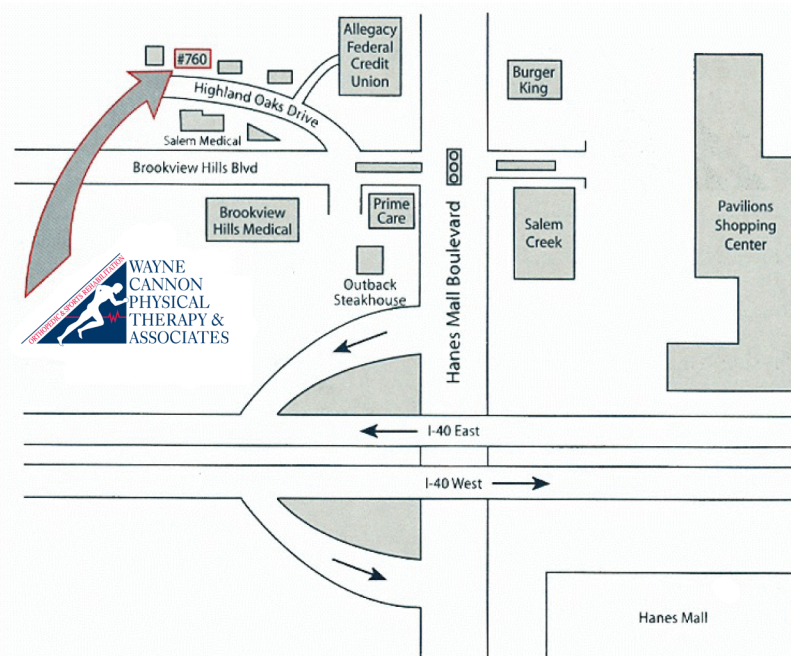
Evaluate & Treat

Physician Signature

Physician Name _____ Physician Phone _____

To have us contact patient and arrange appointment, please fax this script to (336) 659-8636 and include Patient's Preferred Daytime Contact Phone Number _____

Home Cell Work



*We
Begin
By
Listening...*