

Leo Credit, PT MS
Mary Feltovic, PT DPT
Wendy Richards, PT DPT
Adam Dow, ATC-L, EMT



GRAY *Physical Therapy Center PA*

Patient Referral

6 Turnpike Acres Rd, Ste 2
PO Box 1047
Gray, ME 04039
Tel: (207) 657-5600
Fax: (207) 657-5620

PATIENT: _____ **DATE:** _____
Tel: _____ **Diagnosis:** _____
Precautions if any: _____

_____ Evaluate and Treat _____ Consult Exam Only _____ Worksite Evaluation

Modalities

- _____ Iontophoresis
- _____ Ultrasound
- _____ Electrical Stimulation
- _____ Traction
- _____ Biofeedback

Manual Therapy

- _____ Soft Tissue Mobilization/Myofascial Release
- _____ Joint Mobilization
- _____ Muscle Energy
- _____ Strain Counterstrain

Therapeutic Exercise

- _____ ROM/Flexibility
- _____ Strengthening
- _____ Balance/Coordination
- _____ Conditioning-Cardiovascular

Functional Activities

- _____ Mobility Training (Gait and Transfers)
- _____ Work Specific Activities
- _____ Sport Specific Activities
- _____ Instrumental ADL (Household Tasks)

Frequency: _____ **Duration:** _____

Signature: _____ **Phone:** _____

Our Other Locations: Premier Physical Therapy-Lakes Region and Premier Physical Therapy-Midcoast

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