



# BOARDWALK

P H Y S I C A L M E D I C I N E

**BEDFORD** • 1305 Airport Freeway, Suite 130, Bedford, Texas 76021 • TEL 817-358-5878 • FAX 817-358-5824  
**IRVING** • 6161 North State Highway 161, Suite 140, Irving, TX 75038 • TEL 214-524-6310 • FAX 972-870-4910  
**MCKINNEY** • 8080 State Hwy. 121, Suite 210, McKinney, TX 75070 • TEL 972-823-6505 • FAX 972-823-6506  
**ROWLETT** • 7501 Lakeview Pkwy, Suite #130A, Rowlett, TX 75088 • TEL 214-501-1304 • FAX 214-501-1415

PATIENT NAME: \_\_\_\_\_

PATIENT DOB: \_\_\_\_\_ PHONE #: \_\_\_\_\_

INSURANCE CARRIER: \_\_\_\_\_

INSURANCE POLICY #: \_\_\_\_\_ GROUP #: \_\_\_\_\_

DIAGNOSIS: \_\_\_\_\_ ICD-10: \_\_\_\_\_

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Frequency of Treatment:

Duration of Treatment:

1 2 3 4 5 (visits per week)

1 2 3 4 5 6 (weeks)

Procedures:

Programs:

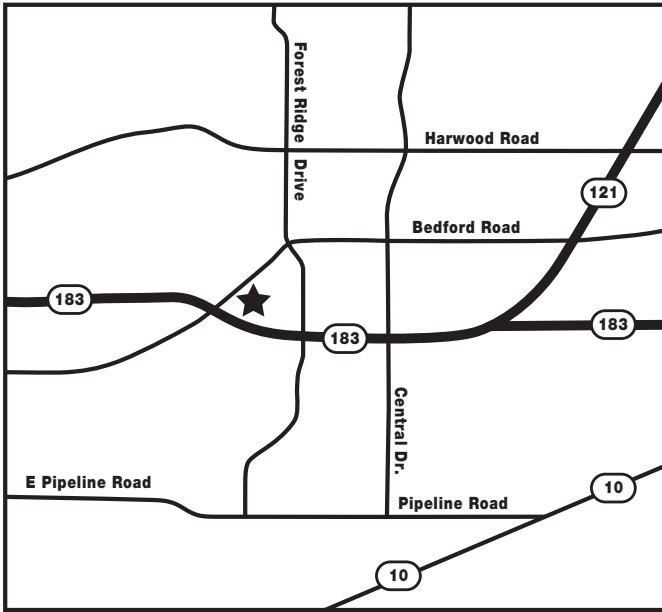
- Manual Therapy
- Therapeutic Exercises
- Electrical Stimulation
- Ultrasound Therapy
- Neuromuscular Re-Education
- Gait Training
- Physical Performance Test
- VNG (Videonystagmography)
- Decompression Therapy

- Cardiovascular
- Vestibular
- Fall Prevention
- EVALUATE and TREAT
- Orthotic Fitting/Training

SPECIAL INSTRUCTIONS/PRECAUTIONS/LIMITATIONS:

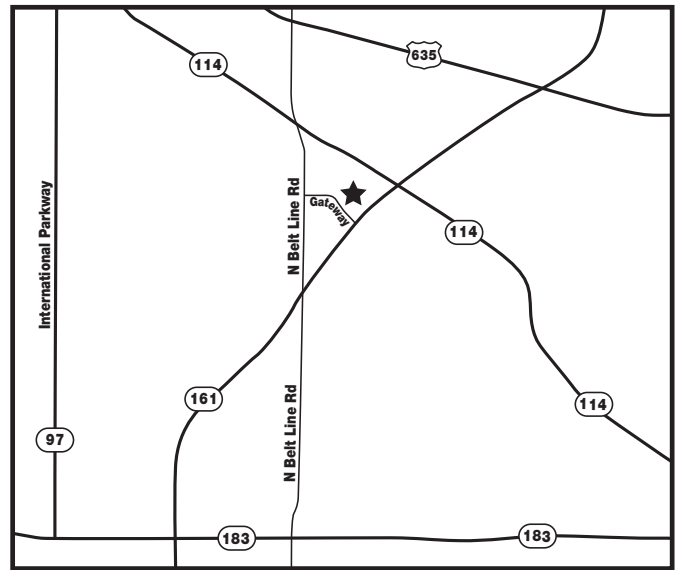
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REFERRING PHYSICIAN SIGNATURE: \_\_\_\_\_



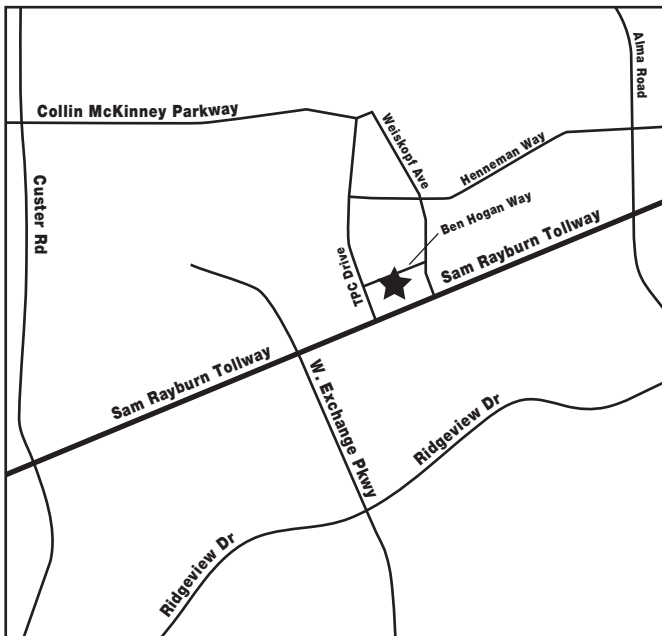
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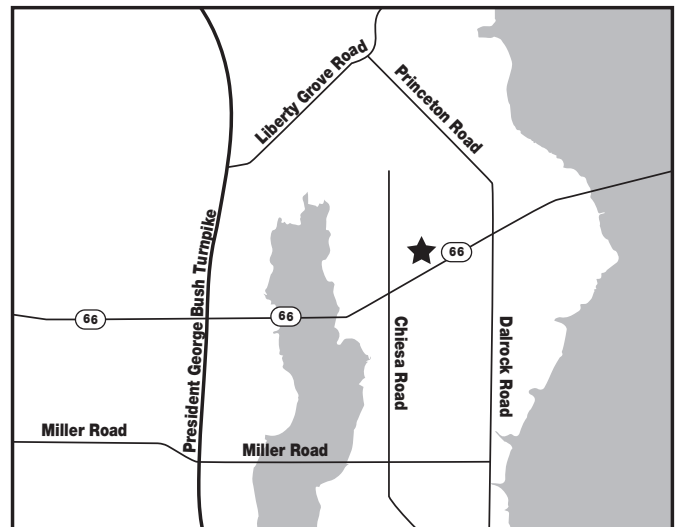
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