

www.henningandcole.com
Physical Therapy

Hunt Valley Medical Center
10 Warren Road, #220
Cockeysville, MD 21030
410-628-7330



866-564-7848(PT4U)

Stem-Ross Professional Bldg.
621A Stemmers Run Road
Essex, MD 21221
410-686-3600

Perry Hall Professional Center
9712 Belair Road, #101-A
Perry Hall, MD 21236
410-256-7070

Water's Edge
111 Bata Boulevard, #C
Riverside, MD 21017
410-273-6000

Tollgate Professional Center
2014 Tollgate Road, #106
Bel Air, MD 21015
410-515-1260

Patient's Name		# & Frequency of Treatment
Date	Diagnosis / Chief Complaint	

- Evaluate and treat Check here for more referral pads

Physical / Hand Therapy

- | | |
|--|--|
| <input type="checkbox"/> Manual Therapy | <input type="checkbox"/> Primal Reflex Release |
| <input type="checkbox"/> Neuromuscular Re-Ed | <input type="checkbox"/> Motorized Traction |
| <input type="checkbox"/> Exercise | <input type="checkbox"/> Compression |
| <input type="checkbox"/> Passive | <input type="checkbox"/> Paraffin |
| <input type="checkbox"/> Active | <input type="checkbox"/> Mobilization |
| <input type="checkbox"/> Resisted | <input type="checkbox"/> Bracing/Splinting |
| <input type="checkbox"/> Postural | <input type="checkbox"/> Electrical Stimulation |
| <input type="checkbox"/> Home | <input type="checkbox"/> Wound care |
| <input type="checkbox"/> Hot Packs | <input type="checkbox"/> TMJ |
| <input type="checkbox"/> Cold Packs | <input type="checkbox"/> Progressive Ambulation |
| <input type="checkbox"/> Ultra Sound | <input type="checkbox"/> Functional Retraining/ADL |
| <input type="checkbox"/> Phonophoresis* | <input type="checkbox"/> Manual Muscle Test |
| <input type="checkbox"/> Iontophoresis* | <input type="checkbox"/> Vestibular Rehab |
| <input type="checkbox"/> Whirlpool/Fluidotherapy | <input type="checkbox"/> Stroke Rehab |

*Please indicate your preference for medication and provide prescription.

Precautions/Comments: _____

I prefer communications by: Letter Phone Email _____

Date of Return Appointment with Physician

Referring Physician's Signature

ADMINISTRATIVE OFFICE

410-683-9900