

SportsCare

Integrative Physical Therapy

Tomiko Saldia, MS, PT, RTY, Cert. MDT
24076 SE Stark St., Ste. 210 • Gresham, OR 97030
Phone: 503-491-1666 • Fax: 503-491-1667

Patient Name: _____

Phone Number: _____ DOB: _____

Diagnosis/ICD – 10 Code: _____

Special Orders or Precautions: _____

Treatments:

- Pelvic Rehabilitation
- Stress Management
- Chronic/Persistent Pain Management
- Mechanical Diagnosis & Therapy

Frequency: Daily 3x Wk 2x Wk 1x Wk Other: _____

Duration: 1 Wk 2 Wks 3 Wks 4 Wks Other: _____

Physician Signature: _____

Physician Name: _____

Phone #: _____ Date: _____