



☐ **Cleveland Physical & Occupational Therapy**

Brad Perry, PT, MS, STS, FAAOMPT, Partner
Benjamin Riebl, PT, DPT, Clinic Director

☐ **Lake Conroe Sports Medicine & Rehabilitation**

Jason Barranco, MPT, Partner
John Fahrner, PT, DPT, CSCS, Clinic Director

☐ **Northern Oaks Orthopedic and Sports Physical Therapy**

Brad Perry, PT, MS, STS, FAAOMPT, Partner
Jonathan Ruzicka, DPT, Clinic Director



☐ **Kingwood Occupational & Physical Therapy**

Offers Certified Hand Therapy

Karen Griggs, OTR, CHT, Partner
Brad Perry, PT, MS, STS, FAAOMPT, Partner

☐ **Lake Houston Physical Therapy**

Brad Perry, PT, MS, STS, FAAOMPT, Partner
Andrew Shippey, PT, CKPT, Clinic Director
Matt Smalling, PT, OCS, SCS, CSCS
(Aquatic Therapy available)

☐ **Spring-Klein Physical Therapy**

Brad Perry, PT, MS, STS, FAAOMPT, Partner
Debbie Campbell, PT, DPT, Clinic Director

☐ **West Woodlands Physical Therapy**

Jason Barranco, MPT, Partner, Clinic Director

Date: _____ Patient Name: _____

Phone: (H) _____ (W) _____

Diagnosis: _____

FREQUENCY: _____ **PER WEEK FOR** _____ **WEEKS**

PHYSICAL THERAPY

☐ **Evaluate & Treat**

Area Treated

- ☐ Cervical ☐ Thoracic ☐ Lumbar ☐ Hip
☐ Shoulder ☐ Leg ☐ Knee ☐ Ankle/Foot

Procedures

- ☐ A/AAROM ☐ Passive ROM ☐ Soft Tissue Mobilization
☐ Joint Mobilization ☐ Myofascial Release ☐ Gait Training
☐ Strengthening ☐ Proprioceptive Training
☐ McKenzie Intervention ☐ Spine Stabilization
☐ Kinesio Taping
☐ Aquatic Therapy (Lake Houston Location Only: Humble, TX)

Modalities

- ☐ Ultrasound ☐ Traction
☐ Iontophoresis/Phonophoresis, RX: _____
☐ Electrical Stimulation: ☐ TENS/ IFC rental ☐ NMES rental
☐ Home Traction

☐ **Home Program Only**

Instructions: _____

OCCUPATIONAL THERAPY - Hand Rehabilitation

☐ **Evaluate & Treat**

Area Treated

- ☐ Wrist ☐ Hand ☐ Elbow ☐ Forearm
☐ MP PIP DIP Joints ☐ Thumb CMC MP IP ☐ Shoulder

Procedures

- ☐ A/AAROM ☐ Passive ROM
☐ Joint Mobilization ☐ Strengthening

Modalities

- ☐ Ultrasound
☐ Iontophoresis/Phonophoresis, RX: _____
☐ Whirlpool/ Wound Management

SPLINTING

___ Custom ___ Static ___ Static Progressive

Instructions: _____

☐ I certify therapy is medically necessary.

UPIN #: _____ Physician Signature: _____



Cleveland Physical & Occupational Therapy

102 N. Travis Street
Cleveland, TX 77327
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www.kingwoodotpt.com



Kingwood Occupational & Physical Therapy

23780 US 59 North
Kingwood, TX 77339
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www.kingwoodotpt.com



Lake Conroe Sports Medicine & Rehabilitation

18001 Highway 105 West, Suite 106
Montgomery, TX 77356
Tel 936-582-2464 • Fax 936-582-4697
www.lakeconroeptandsports.com



Lake Houston Physical Therapy (Aquatic Therapy)

(W. Lake Houston Parkway & 1960)
7840 FM 1960 East, Suite 408 & 409
Humble, TX 77346
Tel 281-812-6665 • Fax 281-812-6869
www.lakehoustonpt.com



Northern Oaks Orthopedic and Sports PT

1900 North Loop W., Suite 560
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Tel 713-263-7740 • Fax 713-263-7748
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Spring-Klein Physical Therapy

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West Woodlands Physical Therapy

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Magnolia, TX 77354
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