



HERITAGE

PHYSICAL THERAPY

In The Tradition of Excellence

JON BERGH, PT

owner

540 Perdue Ave, Suite C . Ridgecrest, CA 93555 . 760.446.3611 *tel* . 760.446.5811 *fax*

PATIENT NAME

DATE

DAIGNOSIS

INSTRUCTIONS/PRECAUTIONS

Recommended Frequency _____ times per week for _____ weeks

TREATMENT PROCEDURES

EVALUATE & TREAT

Sports Medicine/Rehab

Spine Rehab

ML830 Cold Laser

Fall Prevention

Cancer Related Fatigue

Manual Therapy

ADL Training

Neurological Rehab

Electrotherapy

Heat/Paraffin

Massage

Adaptive Equipment

Women's Health Programs

Splinting

I hereby certify the above services have been deemed medically necessary.

PHYSICIAN SIGNATURE

DATE

DO NOT EMAIL PRESCRIPTION The electronic prescription form is provided for your convenience. With respect to responding to this form, please do not send the prescription via email. Please populate, print and sign a hardcopy that may be faxed, mailed or hand delivered to the clinic.



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www.heritagephysicaltherapy.com



Heritage Physical Therapy is featured on

PTandMe.com

***An informational site for patients interested
in or considering physical, occupational, and/or hand therapy.***