## **Demo Physical Therapy**

123 Test Št, Suite 3 Demo, AZ 85024-1144 Phone: (602)555-4879 Fax: (602)555-4880 www.google.com

# Daily Note / Billing Sheet



Patient Name: "Little", Corky Date of Birth: 02/02/2008

Referring Physician(s): Blackwell, Patricia CRNP

Date of Original Eval: 03/28/2012

Treatment Diagnosis: 726.32: Lateral epicondylitis

Secondary Insurance Name: Gieco

**Date of Daily Note:** 03/28/2012

Injury/Onset Date/Change of Status Date: 03/28/2012

Diagnosis: 726.32: Lateral epicondylitis

Visit No.: 6

Primary Insurance Name: Allstate

## **Subjective**

**Informant Providing History: Mother** 

History of Falls: No

Pain Scale: Worst: Best: Current:

#### **Objective**

CPT <sup>®</sup> Code	Untimed Codes	Units
97012	Mechanical Traction	1
90901	Biofeedback Training	1
CPT <sup>®</sup> Code	Direct Timed Codes	Units
97032	E-Stim Manual	1
	See Flowsheet	
97035	Ultrasound/Phonophoresis	1
	See Flowsheet	
97110	Therapeutic Exercise	1
	See Flowsheet	

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### **Assessment**

Rehab Potential: Good Patient Problems:

- patie

Short Term Goals: 1: (1 Visit) | 0% | patien |

#### Plan

Instructions: Continue per Plan of Care

Michael Scott DDT CSCS

Michael Scott, DPT, CSCS License #AZ-68934 Completed by Michael Scott, DPT, CSCS on April 24, 2012 at 6:39 am