



**GORDON**  
**CENTER FOR BALANCE, MOBILITY**  
**AND WELLNESS**

**PRESCRIPTION FOR PHYSICAL THERAPY SERVICES**

Patient's name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

\_\_\_\_\_ Date of birth \_\_\_\_\_

Diagnosis \_\_\_\_\_ Date of onset \_\_\_\_\_

Precautions \_\_\_\_\_

- PHYSICAL THERAPY CONSULTATION AND TREATMENT
- FALL-RISK ASSESSMENT / FALL PREVENTION
- COMPUTERIZED DYNAMIC POSTUROGRAPHY (Sensory Organization /Adaptation)
- STRENGTH FOR LIFE MEMBERSHIP PROGRAM (Fitness program for adults age 55 and older)

TREATMENT: Per Examination Findings

- Canalith Repositioning       Vestibular Rehabilitation       Posture Training
- Balance Training       Neuromuscular Reeducation       Modalities PRN
- Electrical Stimulation       Functional Mobility Training       Gait Training
- Other \_\_\_\_\_

Frequency \_\_\_\_\_ Duration \_\_\_\_\_

COMMENTS \_\_\_\_\_

Physician name \_\_\_\_\_ Phone \_\_\_\_\_

Physician signature \_\_\_\_\_

More prescription forms available at [www.gordon.edu/balance](http://www.gordon.edu/balance).

**GORDON COLLEGE | CENTER FOR BALANCE, MOBILITY AND WELLNESS**

255 Grapevine Road, Wenham MA 01984-1899

T 978 867 4095 F 978 867 4680

E [balance@gordon.edu](mailto:balance@gordon.edu)

[www.gordon.edu/balance](http://www.gordon.edu/balance)