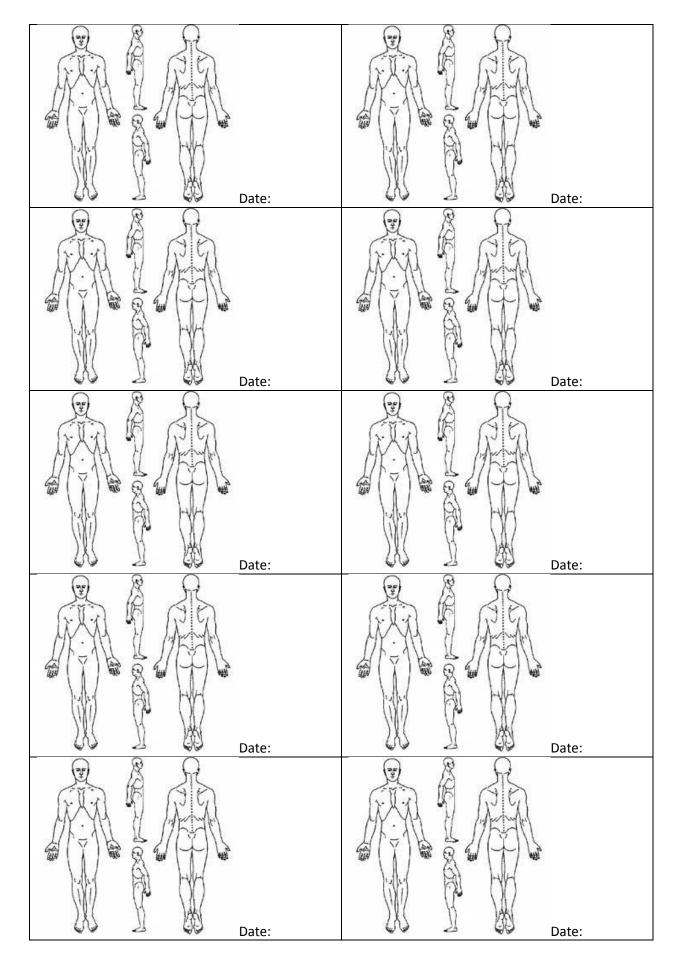
10215 Fernwood Road, Suite 210, Bethesda, MD 20817

Phone 240-482-2438 / 240-482-3106 Fax: 301-530-3030

FLOWSHEET

PATIENT NAME:	DIAGNOSIS:									
		of INJURY / SURGERY:								
REMARKS:										
DATE:										
VISIT NUMBER										
97110 – Therapeutic Exercise 97530 Therapeutic Activities										
·										
Cubbatal time (minutes)										
Subtotal time (minutes) 97140 – Manual Therapy										
37110 Manadi Merapy										
Subtotal time (minutes)										
97112 – Neuromuscular Re-education										
Subtotal time (minutes)										
Other	<u> </u>									
(+ 										
Subtotal time (minutes)										
TOTAL TIME (minutes)										
PT/OT Initials										
	1	1	1	1	1	1	1	1	1	i .



Name:_____