

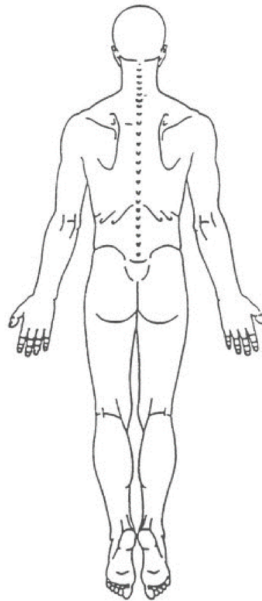
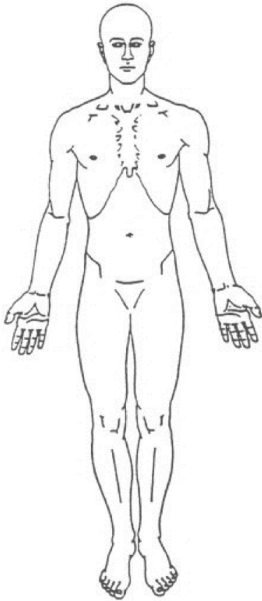
Physical Therapy Note Template

Patient Information

First Name

Last Name

Date of Birth



✕ Adhesion

↻ Rotation

○ Pain

● Tender Joint

≡ Hypertonicity

≈ Spasm

⊙ Inflammation

9 Trigger Point

/ Elevation

Presenting Complaint

Date	Note