

Physical Therapy Patient Record Form Sample

The **physical therapy patient record form sample** is designed to streamline the documentation of patient assessments and treatment plans. This form ensures accurate tracking of patient progress and facilitates effective communication between therapists and healthcare providers. Utilizing a standardized template enhances the quality and consistency of care delivery.

Patient Information

Patient Name:

Date of Birth:

Patient ID:

Contact Number:

Assessment

Diagnosis:

Subjective (Patient's complaint/concerns):

Objective (Findings/Measurements):

Assessment:

Treatment Plan

Treatment Goals:

Interventions Provided:

Home Exercise Program:

Progress Notes:

Therapist Information

Therapist Name:

Date of Session:

Therapist Signature:

Submit