

Medical Record Form Sample for Physical Therapy Documentation

Our **medical record form sample** for physical therapy documentation provides a comprehensive template to accurately record patient assessments, treatment plans, and progress notes. This form ensures clear communication between healthcare providers and supports effective patient care management. Utilizing this standardized document helps maintain thorough and organized physical therapy records.

Patient Information			
Patient Name:		Date of Birth:	
Medical Record #:		Contact Number:	
Referring Physician:			
Assessment			
Diagnosis:			
Subjective Complaints:			
Objective Findings:			
Assessment/Impression:			
Treatment Plan			
Goals:			
Interventions:			
Frequency/Duration:	e.g. 2x/week for 4 weeks		
Progress Notes			
Date:		Therapist Initials:	
Notes:			
Discharge Summary			
Date of Discharge:		Therapist Signature:	
Summary/Recommendations:			