

Myofascial Pain Treatment Center, LLC

Erika Waly Bourne, RN, CMTPT

Physician's Orders

Patient Name _____

Evaluation and treatment of pain in (areas and diagnosis):

Diagnosis Code(s) _____

Using myofascial trigger point release techniques that may include:

- Manual trigger point therapy
- Trigger Point Injection of involved myofascial trigger points
 ____ Sterile Saline only ____ 1% Lidocaine
- Myofascial stretching and corrective exercises
- Ergonomic, posture and self-care training

Additional instructions, precautions or restrictions:

Physician Name _____

Physician Address _____

Telephone # _____ Fax # _____

Email: _____

PHYSICIAN SIGNATURE _____

Date ___ / ___ / ___

Please complete and return to:

Myofascial Pain Treatment Center, LLC

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Watertown, MA 02472

FAX 888-891-7635

781-894-9430 MyoTreatment@gmail.com www.MyofascialPainTreatment.com