



University City Physical Therapy

Gino Cinco, PT, Cert. ART
Kristina Gray, PT, MS
Renee Cinco, PT

5190 GOVERNOR DRIVE
SUITE 107
SAN DIEGO, CA 92122
Office: (858) 452-0282

PATIENT NAME _____ DATE _____
DIAGNOSIS _____ ONSET DATE _____
PRECAUTIONS AND COMMENTS _____

AREA TO BE TREATED

- CERVICAL
- THORACIC
- LUMBAR
- SACO-ILIAC
- PELVIC FLOOR
- SHOULDER
- HIP
- KNEE
- ANKLE/FOOT
- OTHER _____

TEATMENT PROCEDURES

- AROM / PROM
- THEREX
- PRES
- STRETCHING
- JOINT MOBILIZATION

MODALITIES

- HEAT/ICE
- ULTRASOUND
- LASER / INFRARED
- E-STIM
- IONTOPHORESIS
- PHONOPHORESIS
- TENS

SPECIAL PROGRAMS

- Active Release Techniques®
- Sports Wellness Programs
- Women's Health
- Biofeedback:
- Incontinence
- Arthritis Program



FREQUENCY

PHYSICIAN SIGNATURE _____