



**THERAHAND PHYSICAL THERAPY**

Aurora Office  
12500 E Iliff Ave St #320 Aurora Park Plaza 1  
Aurora, CO 80014



(303) 862-8853



(720) 379-5827

**THERAHAND PHYSICAL THERAPY**

Thornton Office  
9101 Pearl St #350  
Thornton, CO 80229



(720) 328-1246



(720) 389-6543

**THERAHAND PHYSICAL THERAPY**

Wheat Ridge Office  
4350 Wadsworth Blvd #425 1st Bank Building  
Wheat Ridge, CO 80033



(303) 564-5008



(720) 484-4329

**THERAHAND PHYSICAL THERAPY**

Westminster Office  
7124 Federal Blvd #800  
Westminster, CO 80030



(720) 502-3670



(720) 398-8675

Patient's Name:

---

Diagnosis:

---

Treatment Requested

---

Insurance Company:

---

Contraindications and/  
or Precautions:

---

EVALUATE AND TREAT

1 2 3 4 5 / per week

Thereby certify these services as medically necessary for the patient's plan for care.

Physician's Signature:

Date:

UPIN#

---