

Myofascial Pain Treatment Center, LLC
Erika Waly Bourne, RN, CMTPT

PATIENT NAME _____

Physician's Orders:

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

Treat using myofascial release techniques including:

- Manual trigger point therapy
- Dry needling of myofascial trigger points
- Myofascial stretching and corrective exercises
- Ultrasound, TENS
- Ergonomic, posture and self-care training

Other instructions or precautions:

Physician Name _____

Physician Address _____

Telephone # _____

Date ___ / ___ / ___

PHYSICIAN SIGNATURE _____

Please complete and return to:
Myofascial Pain Treatment Center
203 Arlington Street, Suite 1
Watertown, MA 02472
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FAX 888-891-7635
Myotreatment@gmail.com
www.MyofascialPainTreatment.com