

6/23/08, Diagnosis

Julie

06-23-08 A08:03 IN

Physical/Occupational Therapy Prescription

Dameron Hospital Occupational Health Services

420 W. Acacia Street

Stockton, CA 95203

209-461-3196

Date: 6/23/2008

Name: Tiffany Anderson (DOB: 8/22/1970)

Diagnosis: 1. Knee effusion, Right (719.06). 2. Anterior Cruciate Ligament Sprain, Right (844.2).

Therapy: evaluation and treatment

Frequency: three times a week

Duration: two weeks

Comments:

D. Rimmer

Mike Dixon, PA-C

209 333-1037 hm.

