



Date of Service: \_\_\_\_\_

Patient Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Reason for visit: \_\_\_\_\_

Diagnosis (ICD-10) Codes: \_\_\_\_\_

◇ Initial Evaluation: (\$80.00)

◇ Low (97161)

◇ Moderate (97162)

◇ High (97163)

◇ Re-evaluation (97164) (N/A)

◇ Dry Needling (performed concurrently with Manual Therapy (97140):

◇ 1-2 muscles (20560)

◇ 3+ muscles (20561)

◇ Manual Therapy (97140) x \_\_\_\_\_ (\$40.00/ charge) ◇ .59 modifier

◇ Massage (97124) x \_\_\_\_\_ (\$40.00/ charge) ◇ .59 modifier

◇ Therapeutic Activities (97530) x \_\_\_\_\_ (\$40.00/ charge) ◇ .59 modifier

◇ Neuromuscular Re-education (97112) x \_\_\_\_\_ (\$40.00/ charge) ◇ .59 modifier

◇ Therapeutic Exercise (97110) x \_\_\_\_\_ (\$40.00/ charge) ◇ .59 modifier

Total Charge: \$ \_\_\_\_\_ / 60 min Paid: ◇ Card ◇ Cash ◇ Check

**(Note: Patient has paid in full for services listed above. Any payments should be sent directly to patient listed above.)**

\_\_\_\_\_  
K S Brooks, PT  
Dr. Kurt S Brooks, PT (NC license #5134)

Location Code: 11 (Stand Alone, Outpatient Clinic) TIN 41-3200544 / NPI2: 1699630608