# Treatment Status - Liora Grazier

CLIENT NAME:

DATE OF ACCIDENT: ______ /______ /______

DATE:

FILE NO.: ________

NAME, ADDRESS AND TELEPHONE NUMBER OF DOCTOR YOU ARE CURRENTLY TREATING WITH:

HOW OFTEN ARE YOU RECEIVING PHYSICAL THERAPY?

ARE YOU TREATING WITH ANY SPECIALIST?

IF SO, LIST NAME, ADDRESS AND TELEPHONE NUMBER OF SPECIALIST:

PRESENT COMPLAINTS:

DO YOU HAVE ANY TINGLING, NUMBNESS OR FALLING ASLEEP SENSATIONS IN YOUR ARMS OR LEGS?

ARE YOU SATISFIED WITH THE TREATMENT YOU ARE RECEIVING FROM YOUR DOCTOR?

HAVE YOU COMPLETED YOUR TREATMENT?

IF SO, WHEN WHERE YOU FORMALLY DISCHARGED?

DID YOU MISS TIME FROM WORK?

IF SO, LIST DATES YOU MISSED FROM WORK

X ____________________

# Signature Certificate

Document name: Treatment Status - Liora Grazier

Unique Document ID: AE1376ADEA1E5B48DF858BFBA39CA34CA1E6DFB7

LEGALLY SIGNED USING WPesignature
Build. Track. Sign Contracts.

| Timestamp | Audit |
| --- | --- |
| May 20, 2020 7:21 pm GMT | Treatment Status - Liora Grazier Uploaded by David Rosenbaum - test@rosenbaumfirm.com IP 162.221.24.2 |
| May 20, 2020 11:55 pm GMT | Liora Grazier - lgrazier@rosenbaumfirm.com added by David Rosenbaum - test@rosenbaumfirm.com as a CC'd Recipient Ip: 68.80.162.82 |

This audit trail report provides a detailed record of the online activity and events recorded for this contract.