# Therapist Evaluation Form Instructions

**DOWNLOAD CURRENT VERSION OF ADOBE READER**

You will need the latest version of the **Adobe Reader** in order to be able to open and use this PDF evaluation form. **http://www.adobe.com** —look for the button for "Adobe Reader" - it is a FREE download

**EVALUATION FORM FILE**

**TEMPLATE bpi therapist eval form.pdf**
This is the name of the PDF file that we created so that you can input directly into the evaluation form.
Once you open the form, you will note that you can input to all the shaded areas.
Date boxes have a pull-down calendar, there are check mark boxes, etc.

Save this file to your hard drive and keep it as your "empty template" so that you can use it as many times as you like.

**INPUT YOUR DATA**

You can input the data for one patient directly into this file.
Save the file with a new file name containing the patient's name so that you can easily retrieve this patient's evaluation form at a later date. When you save it, put it in a folder that makes sense to you, so that you know where to find it later—or create a new folder for this purpose.

**SEND THE EVALUATION TO DR. NATH FOR HIS REVIEW AND PATIENT HISTORY**

Just send an email to Dr. Nath's assistants at **contact@drnathmedical.com** and "attach" this file to the email.

OR

you can print the empty form and fill it in manually and then mail or fax it directly to the office:

Dr. Rahul Nath
2201 W. Holcombe Blvd, Suite 225
Houston, TX 77030
FAX (713) 592-9921

**FOLLOW-UP WITH PATIENTS WHO HAVE HAD SURGERY WITH DR. NATH**

- Video three months post-op followed by a video at one-year post op
- Evaluation by therapist every three months for two years post-op (using this form)

**Need technical help with Adobe or the form? Contact Francine Litz at tnpiclinics@gmail.com.**