

# Physician Web Scheduler (PWS)

## Approved Procedures

### **Therapy Evaluations (11)**

THERAPY EVAL – ACUTE GENERAL (JOINT/MUSCLE DX) PT

THERAPY EVAL – AQUATICS (PT)

THERAPY EVAL – FOOT ORTHOTICS (PT)

THERAPY EVAL – HAND, WRIST OR FINGER (OT)

THERAPY EVAL – HAND, WRIST OR FINGER POST-OP (OT)

THERAPY EVAL – INCONTINENCE &/OR PELVIC LAXITY (PT)

THERAPY EVAL – JAW/TEMPOROMANDIBULAR JOINT (PT)

THERAPY EVAL – LYMPHEDEMA OR S/P BREAST CA (PT)

THERAPY EVAL – SPEECH (ADULT)

THERAPY EVAL – VERTIGO/BPPV/VESTIBULAR REHAB (PT)

THERAPY EVAL – WHEELCHAIR ASSESSMENT