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**PHYSICIAN'S PRESCRIPTION FOR MEDICALLY NECESSARY MASSAGE**

For patient \_\_\_\_\_ treatment is medically necessary for the treatment of his/her MVA injuries. Please treat this patient for the diagnoses listed and use the modalities and procedures indicated below.

PIP Insurance Company \_\_\_\_\_ Claim# \_\_\_\_\_

MODALITIES/ PROCEDURES

\_\_\_ 97001 Evaluation  
\_\_\_ 97010 Hot Packs  
\_\_\_ 97010 Cold Packs  
\_\_\_ 97002 Reevaluation  
XX 97124 Massage Therapy  
XX 97140 Manual Therapy (soft tissue)

ICD -10 CODES – soft tissue diagnoses

\_\_\_ **M25.519 PAIN** in unspecified **SHOULDER**  
\_\_\_ **M25.528 PAIN** in unspecified **ELBOW**  
\_\_\_ **M25.569 PAIN** in unspecified **KNEE**  
\_\_\_ **M 54.5 LOW BACK PAIN**  
\_\_\_ **G89.21 CHRONIC PAIN due to trauma**  
\_\_\_ **G44.309** Post Traumatic **HEADACHE** unspecified not intractable  
\_\_\_ **S13.4XXA SPRAIN** of ligaments of **CERVICAL** spine, **initial** encounter  
\_\_\_ **S13.4XXD SPRAIN** of ligaments of **CERVICAL** spine, **subsequent** encounter  
\_\_\_ **S23.3XXA SPRAIN** of ligaments of **THORACIC** spine, **initial** encounter  
\_\_\_ **S23.3XXD SPRAIN** of ligaments of **THORACIC** spine, **subsequent** encounter  
\_\_\_ **S23.8XXA sprain of other unspecified parts of thorax, initial** encounter  
\_\_\_ **S33.5XXA SPRAIN** of ligaments of **LUMBAR** spine, **initial** encounter  
\_\_\_ **S33.5XXD SPRAIN** of ligaments of **LUMBAR** spine, **subsequent** encounter  
\_\_\_ **M54.2 CERVALGIA**

More specific or additional DX Codes

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

FREQUENCY \_\_\_ sessions per \_\_\_ for \_\_\_ weeks (date of re-exam) \_\_\_\_\_

Physician's Name (print) \_\_\_\_\_

Physician's Signature \_\_\_\_\_ Date \_\_\_\_\_

License # \_\_\_\_\_ or NPI # \_\_\_\_\_