



You can also provide your testimonial online by going to:
www.thermocareplus.com
Click "Physician Forms" and select "Online Testimonial Form"

Testimonials for ThermoCare System

(see page 2 for example)

- By checking this box I agree to allow ThermoCare Plus the right to use this testimonial for all advertising and promotional purposes. I also agree to allow the use of a stock photo to represent my likeness in conjunction with this testimonial. I understand that I will not receive any compensation for the testimonial.

Name _____ Age _____

Occupation _____

Hobbies _____

Diagnosis / Procedure _____

Physician Name / Hospital _____

Overview of how the injury happened, treatment that followed and the results.

Please return completed form to your sales representative or send directly to Thermocare Plus:

Fax:
516-5009508

Mail:
Attn: Testimonials
22 Jericho Turnpike
Suite 201
Mineola, NY 11501

Email:
chris@thermocareplus.com



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Name John Smith Age 52

Occupation city bus driver

Hobbies skiing, golf

Diagnosis / Procedure I slipped and hurt my ankle on ice. After seeing my physician we decided on surgery.

Physician Name / Hospital Dr. Harris / North Shore Hospital

Overview of how the injury happened, treatment that followed and the results.

After surgery, my Doctor and I weighed all the options for rehabilitation. Because I drive for a living I didn't want medication in my system. My doctor was also concerned that I sit all day, which could lead to the development of a blood clot. This is why he prescribed the ThermoCare System. Using the combined treatment of the ThermoCare System within one week I had a 90% pain reduction and 100% pain reduction from my pre-operative state by week 5. I'm amazed by my recovery, and wouldn't have been able to do it without the Thermo Care system. I still have to exercise every day but am pretty much back to normal and can ski and golf again.

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