

Rehabilitation Services — Athens

OhioHealth Castrop Health Center | 75 Hospital Drive, Suite 160, Athens, Ohio 45701

Patient Information

Date: _____ Date of birth: _____

Patient name: _____

Best contact number: _____ Alternate phone: _____

Dx: _____ Dx code: _____

Start date: As soon as possible At patient's request Specific start date: _____

Therapy Services:

- Occupational Therapy
- Physical Therapy
- Speech Therapy

Specialty Services:

- Sports Medicine Therapy
- Amputee Therapy
- Hand Therapy
- Lymphedema Therapy
- Neurological Therapy
- Pediatric Therapy
- Speech Therapy
- Pelvic Floor Therapy
- Vestibular and Dizziness Therapy
- Incontinence/Pelvic Pain

Rx:

Evaluate and treat

- Cryotherapy
 - Ice Massage
 - Cold Packs
- Electrical stimulation
- Exercise
 - ROM/Flexibility
 - Strengthening
 - Proprioception
 - Endurance/Conditioning
 - Home Exercise Program
- Gait/balance training
 - NWB PWB _____%
 - FWB
 - Wean out of brace/boot
- Heat
 - Ultrasound Moist heat
 - Paraffin
- Iontophoresis
 - Dexamethasone 4mg/ml
(volume per protocol)
- Phonophoresis
 - 10% Hydrocortisone
- Manual Therapy
 - Myofascial Release
 - Joint Mobilization
 - Muscle Energy

- Modalities as indicated
- Orthotics – Custom Foot
- Neuromuscular Re-education
- Patient Education
- Splint UE (custom)
 - Left Right
- Hand Based
 - Forearm Based
 - Neutral Position
- Traction
 - Cervical
 - Lumbar
 - Home Unit
- Industrial Rehabilitation
 - Transitional Work
 - Ergonomic Assessment

Special instructions:

Treatment Plan: Therapist Discretion **OR** Frequency _____ Duration _____

Physician Signature: _____

Physician Name (please print): _____

When making this referral, physician certifies that prescribed rehabilitation to evaluate patient, develop and implement a Plan of Care is medically necessary.