

**Patient Name**

**Date of Birth**

**Patient Address**

**City**

**State**

**Zip**

( )

( )

**Primary Phone**

**Secondary Phone**

**Insurance**

**Evaluate and treat:**

**PHYSICIAN/MEDICAL SERVICES**

- Rehab Physician/Physiatry/PM&R\*
- EMG *Indicate body part* \_\_\_\_\_ L / R / Bilateral
- Prosthetic/Orthotic Evaluation

**THERAPY SERVICES**

- Occupational Therapy (OT)       Aquatic Therapy (OT)
- Physical Therapy (PT)             Aquatic Therapy (PT)
- Vestibular/Vertigo Therapy (PT)
- Speech/Cognitive Therapy\* (ST)
- MBS/FEES/Swallow Eval\* (ST)
- Aphasia Day Treatment\* (PT/OT/ST)
- Cognitive Day Treatment\* (PT/OT/ST)
- Pulmonary Rehab\* (RT) - *PFT report may be required*

**CONCUSSION CARE**

- Rehab Physician/Physiatry/PM&R\*
- PT/Vestibular
- SLP/Cognitive\*
- OT/Vision
- Neuropsychology\*
- Psychology\*/Counseling\*

**SPECIALTY SERVICES**

- Wheelchair Assessment
- Nutrition Consultation
- Work Conditioning (PT)
- Neuropsychology\*
- Psychology\*/Counseling\*
- X-ray       Ultrasound       CT Scan
- Traurig Transitional Living Center-Stroke & Brain Injury\*  
(includes aphasia or cognitive day treatment program)  
Traurig Referrals: (203) 741-3488    Fax: (203) 294-8766

**Diagnosis/Reason to be seen**

**Date of Onset/Injury**

- < 1 month     1-3 Months     > 3 months

**OR** exact date if known: mm/dd/yy: \_\_\_\_\_

Other info: \_\_\_\_\_

**Specific Orders**

**Precautions**

**Referring Physician Name**

(Please print) \_\_\_\_\_

**Physician Signature**

(Required to be valid) \_\_\_\_\_

**Referral Date**

**Office**

**Phone** \_\_\_\_\_ **FAX** \_\_\_\_\_

**Office Location**

**Neurologic & Orthopedic Therapy Locations**

- 8 Devine St, North Haven                      (203) 230-9226
- 50 Gaylord Farm Road, Wallingford            (203) 284-2888

**Orthopedic Physical Therapy Locations**

- 1154 Highland Ave, Cheshire                      (203) 679-3533
- 50 Berlin Rd, Cromwell                              (203) 284-3020
- 28 Durham Rd, Madison                              (203) 284-2929

- Rehab Physician** Appointments                      (203) 284-2845  
(Wallingford only)

**\* THESE SERVICES MUST INCLUDE RECENT OFFICE  
NOTES AND PERTINENT IMAGING/LABS**