OSI Physical Therapy

Patient Name: _____ **Date:** _____

Patient's Phone Number: _____ **Patient's DOB:** _____

Diagnosis: _____

Relevant Test Results: _____

Surgical Procedures: _____

Contraindications: _____

☐ **EVALUATE AND TREAT** *(with procedures and physical agents & modalities as indicated)*

☐ **IONTOPHORESIS APPROVED**
(Patient requires a separate medication prescription for Dexamethasone (4 mg/ml injectable – 10 cc)

Additional Comments:

_____

_____

_____

Specialty Services: *(at select locations)*

- ☐ Aquatics
- ☐ Balance Training
- ☐ Bike Fitting
- ☐ Biofeedback
- ☐ Bone Health & Falls Prevention
- ☐ Chronic Pain
- ☐ Custom Hand Splinting
- ☐ Custom Foot Orthotic Fitting
- ☐ Fitness Training
- ☐ GRASTON®
- ☐ Hand Therapy
- ☐ Headaches
- ☐ Occupational Health Services
- ☐ Pelvic Pain
- ☐ Postural Restoration
- ☐ Spinal Rehab
- ☐ Sport Performance Training
- ☐ Sport Specific Assessment
- ☐ Sport Injury Rehab / Return to Sport
- ☐ TMJ
- ☐ Urinary Incontinence Training
- ☐ Vestibular Rehab
- ☐ Weight Management Services
- ☐ Work/Office Ergonomic Evaluation

PHYSICIAN'S SIGNATURE: _____ **Date** _____

For the Patient/Client:

New patients and patients with new conditions must pre-register PRIOR to your first appointment. Please have your insurance information and this form available when you make your call.

PRE-REGISTRATION: 651-275-4706 or Toll Free: 1-800-213-9551

For online pre-registration go to www.osipt.com

Therapist's Name: _____ **Date:** _____

Appointment Date: _____ **Appointment Time:** _____

Please arrive for your appointment 20 minutes prior to your scheduled time, and please bring along the following:

- Your driver's license or other form of identification
- This form
- Your insurance card
- A list of your current medications
- A completed medical history form *(You can speed up the process by downloading the medical history form from www.osipt.com, printing it and completing it prior to your appointment)*

For more of these forms contact info@therapypartners.com or call 651-439-9509