

REHABILITATION AND WELLNESS DEPARTMENT

At the White Birch Medical Center
899 Central Street
Millinocket, Maine 04462

OUT-PATIENT REFERRAL

Patient Information _____ Date: _____
Name _____ DOB _____
Phone/Cell# _____ Insurance _____
Diagnosis _____

Physical Therapy/Evaluate and Treat

- Therapeutic Exercise Gait Training Vestibular Rehabilitation
 Aquatic Therapy Functional Training Lymphedema Management
 Balance/ Neuro Re-education (MLD, CDT, edema care)
 Iontophoresis (specify) Dexamethasone Acetic Acid 5%
 Phonophoresis / Dexamethasone 0.4%
External Support (specify) _____
Other _____ Precautions _____

Occupational Therapy/Evaluate and Treat

- Therapeutic Exercise Self-Care Training
 Cognitive skills Training Sensory Integration Therapy
 Phonophoresis / Dexamethasone 0.4%
 Iontophoresis (specify) Dexamethasone Acetic Acid 5%
Splint Fabrication/Modification (specify) _____
Other _____ Precautions _____

Speech Language Pathology

- Speech Evaluation Speech Treatment
 Swallow Evaluation Swallow Treatment
 Cognitive Evaluation Cognitive Treatment

Other _____ Precautions _____

Provider Signature / Date

