



Rehabilitation Services and Interventional Pain Center Order Form

PLEASE NOTE: Patient should bring this original form and insurance information to the first appointment. Certain evaluations and treatments are available only at specific locations as listed below. Please check the appropriate location for this visit – maps for all locations are available on the reverse.

TO SCHEDULE AN APPOINTMENT, CALL OR FAX:

<input type="checkbox"/> Hospital - Robbinsdale	Phone	Fax
<input type="checkbox"/> Interventional Pain Center	(763) 520-2826	(763) 520-2829
<input type="checkbox"/> Physical/Occupational Therapy	(763) 520-5690	(763) 520-1772
<input type="checkbox"/> Speech Pathology	(763) 520-5614	(763) 520-4867
<input type="checkbox"/> Maple Grove at Arbor Lakes		
<input type="checkbox"/> Physical/Occupational Therapy	(763) 416-4605	(763) 420-7102
<input type="checkbox"/> Speech Pathology	(763) 420-7002	(763) 420-7102
<input type="checkbox"/> Elk River		
<input type="checkbox"/> Occupational Therapy	(763) 416-4605	(763) 420-7102
<input type="checkbox"/> Speech Pathology	(763) 420-7002	(763) 420-7102

Patient Name: _____ **DOB:** _____ **Phone Number:** _____

Contact Name if other than Patient: _____ **Phone Number:** _____

Diagnosis: _____ **Onset Date:** _____

Pertinent Health Conditions/Precautions: _____

OCCUPATIONAL THERAPY

- Evaluate and Treat
- Evaluate and Call With Recommendations
- Cognitive Performance Test
- Listening Program (Maple Grove only)
- Interactive Metronome (Maple Grove only)

Frequency/Number of Visits: _____

- Bioness (Robbinsdale only)
- Splints (Robbinsdale only, please specify): _____
- Other (please specify): _____

PHYSICAL THERAPY (Robbinsdale or Maple Grove)

- Evaluate and Treat
- Vestibular Assessment and Treatment (Robbinsdale only)
- Lymphedema Assessment and Treatment (Robbinsdale only)

Frequency/Number of Visits: _____

- Hydrotherapy/Wound Care (please specify): _____
- Bioness (Robbinsdale only)
- Torticollis Assessment/Treatment
- Other (please specify): _____

SPEECH PATHOLOGY

- Evaluate and Treat
- Video Swallow Evaluation (Robbinsdale only)
- Stroboscopy (Robbinsdale only)
- Concussion Assessment/Treatment

Frequency/Number of Visits: _____

- Feeding
- Listening Program
- Other (please specify): _____

INTERVENTIONAL PAIN CENTER

- Evaluate and Treat
- Procedure Only (please specify): _____
- Worker's Compensation

Frequency/Number of Visits: _____

- Call if on Coumadin or platelet inhibitors
- Other (please specify): _____

Physician Signature/Physician ID Number

Date

Physician Name (printed)



North Memorial Rehabilitation Services Clinic
 800 Freeport Ave. N. Suite 102
 Elk River MN, 55330

Located in the North Memorial Health Plaza at the intersection of Freeport Ave. and School St.



North Memorial Rehabilitation Services Clinic
 12000 Elm Creek Blvd. Suite 210
 Maple Grove, MN 55369

Located in the Arbor Lakes Medical Building near the intersection of Hemlock Lane and Elm Creek Blvd.



North Memorial Rehabilitation Services
 3300 Oakdale Ave. N.
 Robbinsdale, MN 55422

Located on the plaza level of North Memorial Medical Center near the intersection of Abbott Ave. and County Road 81.