



www.memphispt.com

DESOTO COUNTY PHYSICAL THERAPY



Olive Branch (FCE)
7501 Goodman Road, Ste 1
Olive Branch, MS 38654
T. 662-890-3382
F. 662-890-3385
www.crosscreekpt.com

Arlington
6050 Airline Road Suite 106
Arlington, TN 38002
T. 901-867-8989
F. 901-867-8757

Bartlett/ MIRC (FCE)
6600 Stage Rd, Ste 129
Bartlett, TN 38134
T. 901-371-0732
F. 901-371-0859

Downtown
440 North Front St., Suite 102
Memphis, TN 38105
T. 901-577-9484
F. 901-577-9483

East Memphis/ MIRC (FCE)
5039 Park Ave, Ste 102
Memphis, TN 38117
T. 901-818-9746
F. 901-818-9741

Millington
8390 Highway 51 N. Suite 101
Millington, TN 38053
T. 901-872-6422
F. 901-872-6497



Southaven
7065 Airways Blvd., Ste 110
Southaven, MS 38671
T. 662-349-8997
F. 662-349-8987
www.kinetixpt.net

PATIENT INFORMATION

Patient's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_
Diagnosis: \_\_\_\_\_
Special Instructions: \_\_\_\_\_
Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell: \_\_\_\_\_
Primary Insurance: \_\_\_\_\_
Secondary Insurance: \_\_\_\_\_ \*copy of insurance card attached
Referring Physician: \_\_\_\_\_ Office Contact: \_\_\_\_\_
Office Phone: \_\_\_\_\_ Office Fax: \_\_\_\_\_

PHYSICAL / OCCUPATIONAL THERAPY PROCEDURES

Evaluate & Treat
Modalities
Therapeutic Exercise
Home Traction Unit
Home TENS Unit
HEP
McKenzie Back Program
Manual Therapy
Other \_\_\_\_\_

WORKER'S COMPENSATION SERVICES

Work Hardening / Conditioning
Functional Capacity Eval (FCE)

FREQUENCY/DURATION

Frequency: 1x/Wk 2x/Wk 3x/Wk 4x/Wk 5x/Wk
Duration: 1Wk 2Wks 3Wks 4Wks \_\_\_\_\_ Therapist Discretion

PROGRAM GOALS

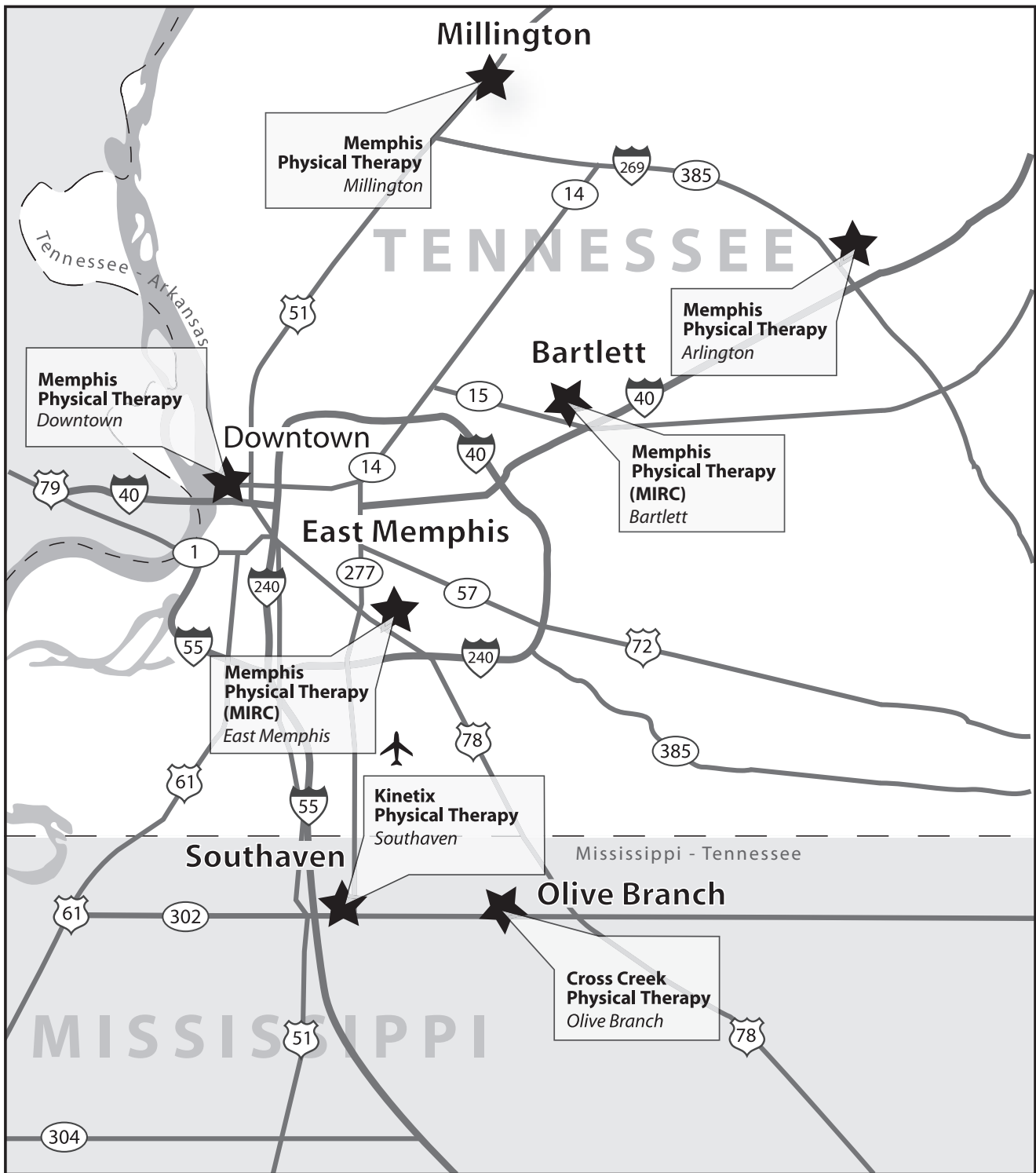
Relieve Pain
Increase ROM
Increase Strength
Increase Endurance
Decrease Edema
Improve Functional Skills

I certify that the above marked therapy/rehabilitation service is medically necessary:

Physician's Signature

Date (Medicare Required)

DO NOT EMAIL PRESCRIPTION The electronic prescription form is provided for your convenience. With respect to responding to this form, please do not send the prescription via email. Please populate, print and sign a hardcopy that may be faxed, mailed or hand delivered to the clinic.



**JUST A REMINDER:**

Please arrive 15 minutes before your scheduled appointment to complete the necessary paperwork.  
Evaluations (1st visit) usually last 1 to 2 hours.

**WHAT TO WEAR:**

Please wear/bring comfortable clothing and sneakers including T-shirts and shorts or sweatpants.

**WHAT TO BRING:**

Please bring this referral slip with you on your first visit. Appropriate insurance claim form or PPO/HMO referral slip or workers' compensation employer information including claim # or no fault insurance information.