



**PRIMARY THERAPY SOURCE**

*Treating you to a better Life.*

# THERAPY REFERRAL

Patient Name: \_\_\_\_\_

Patient Phone: \_\_\_\_\_

Diagnosis: \_\_\_\_\_

\_\_\_\_\_ Physical Therapy Exam & Treatment

\_\_\_\_\_ Occupational Therapy Exam & Treatment

\_\_\_\_\_ Speech Therapy Exam & Treatment

Frequency: \_\_\_\_\_ x week      Duration: \_\_\_\_\_ weeks

Remarks:

Physician Signature: \_\_\_\_\_

Date: \_\_\_\_\_      Physician Office Phone: \_\_\_\_\_

**FAX REFERRAL TO: 208-734-8350**

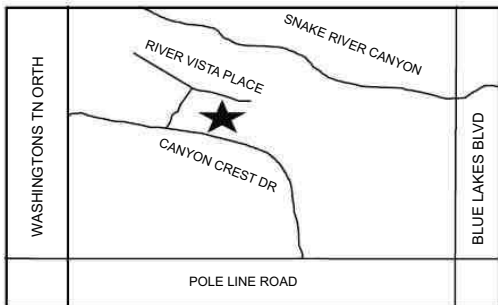
*254 River Vista Place*

*Twin Falls, ID 83301*

*Phone: (208) 734-7333*

*www.primarytherapysource.com*

- Adaptive Equipment Assessments
- Aquatic Therapy
- Back, Neck & Headache Pain Care
- Balance & Coordination Training
- Cardiopulmonary Endurance Training
- Craniosacral Therapy
- Ergonomic Assessments
- Fine Motor Skill Development
- Fitness Assessments
- Gait Training
- Hippotherapy/Therapeutic Riding
- Infant & Child Developmental Assessments
- Lymphedema Management
- Massage & Soft Tissue Mobilization
- Neurologic & Orthopedic Evaluations
- Orthotic & Prosthetic Training
- Orthopedic Rehabilitation
- Pain Management
- Pediatric Burn Care
- Pediatric Evaluation & Treatment
- Pediatric Motor Development Training
- Pre-Natal Back Pain Management
- Post-Mastectomy Rehabilitation
- Post-Operative Care
- Sensory Integration Therapy
- Spinal Cord Injury Rehabilitation
- Spinal Stabilization & Strengthening
- Sports Injury Rehabilitation
- Strength Training Programs
- Therapeutic Exercise
- Visual-Perceptual Skill Training
- Work Injury Rehabilitation
- Wound Care
- Feeding Therapy
- Oral-Motor Evaluation & Treatment
- Pediatric Communication Assessments
- Receptive/Expressive Language Therapy



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