

Patient Label

6 CARE LANE, 2ND FLOOR Saratoga Springs, N.Y. 12866

225 WASHINGTON STREET Saratoga Springs, NY 12866

Call for Appointment: 518-583-8383

www.SaratogaHospital.org

Saratoga Medical Park at MALTA 8 Medical Park Drive, Suite 101 Malta, NY 12020

MILTON HEALTH CENTER

510 Geyser Road Ballston Spa, NY 12020

RTC Location:

| THE SPRINGS ON WEIBEL AVE. | Rehab Direct FAX: 518-583-8437 |
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9 Hampstead Pl., Saratoga Springs, NY 12866

| Patient Name (Print): | | Date of Birth: | | |
|--|--|---------------------------------------|---|--|
| Diagnosis/Surgeries: | | Date of Onset/Surgery: | | |
| Treatment Restrictions: □ N | one 🗆 | NWB □WBAT □ | | |
| Sling/Brace/Orthotic: □ Wear at all times □ Use as needed □ As directed by therapist □ | | | | |
| Treatment Objectives: Improve Function Safety Ambulation Other: | | | | |
| | · | | | |
| EVALUATE & TREAT AS APPROPRIATE (Select at least one discipline): | | | | |
| ☐ Physical Therapy (P | T) ☐ Occupational Therapy | (OT) □ Speech-Langu | age Pathology (SLP) | |
| ☐ PER PROTOCOL: | | □ CONSULT ONLY | | |
| OPTIONAL SELECTIONS F | OR TREATMENT, INTERVEN | TIONS, SPECIAL PROGRA | MS: | |
| Orthopedic (PT/OT): | OT/Hand Therapy: | Speech Therapy (ST) | Other Specialized Services: | |
| ☐ Modalities as Indicated | ☐ ADL Retraining | Adult Only: | ☐ Aquatic Physical Therapy | |
| □ ***Iontophoresis with | ☐ Driving-Related Skills | □ Video Fluoroscopy | ☐ Aging Safely In Place - | |
| Dexamethasone 4mg/mL | Eval & Recommendations | Of Swallow Function | Rehab & Safety Plan | |
| Therapeutic Exercise: | ☐ Hand Therapy/Rehab | Infants & children: | (OT/PT/ST) | |
| □ PROM/AAROM | ☐ Dynamic Splinting | ☐ Pediatric Feeding | □ *Custom Foot Orthotics | |
| ☐ Stretching | ☐ Static Splinting | Children ≥ 3 y.o. & Adults: | ☐ Digestive & Abdominal | |
| □ AROM | Women's Health Programs: | ☐ Articulation | Pain and Symptoms (PT) | |
| ☐ Strength/Conditioning | ☐ Breast-Related Rehab | □ Dysarthria | ☐ Lymphedema-No Wounds | |
| □ Proprioceptive | ☐ Pre/Post-Partum Back | ☐ Cognitive | $(PT-UE/LE/Trnk,\ OT-UE)$ | |
| ☐ Plyometrics | And Leg Pain (PT) | ☐ Fluency | ☐ Parkinson's - LSVT Big | |
| ☐ Joint Mobilization | ☐ Osteoporosis (PT) | ☐ Parkinson's - LSVT | available (PT) | |
| ☐ Soft Tissue Mobilization | Ready-To-Work Services: | Loud available | ☐ Pediatric Habilitation | |
| ☐ Graston Soft Tissue Mob | **For WC Only (PT & OT) | ☐ Speech & Language | 3 y.o. & older (OT/PT/ST) | |
| ☐ McKenzie Spine Protocol | ☐ Functional/Work | ☐ Swallowing/Dysphagia | ☐ Pelvic Pain & Incontinence | |
| ☐ Kinesio Taping | Capacity Eval (FCE/WCE) | VitalStim available | \square Post-Concussion (<i>PT</i>) | |
| ☐ Gait Analysis/Training | ☐ Work Hardening Program | □ Voice | \square Vestibular Rehab (PT) | |
| | | | | |
| | ices are generally <u>NOT</u> covered by | | | |
| | lable only to Workers' Compensati | | | |
| FREQUENCY/DURATION (S | Select one): As necessary & | appropriate \(\sum_{\text{times}} \) | per week forweeks | |
| UPDATE FOR MEDICARE I | REQUIREMENTS/COMPLIAN | CE: □ | | |
| | I certify that this plan of | care is medically necessary for | r the diagnosis indicated above. | |
| | | | | |
| Physician Phone Number &/or | Address Physici | an/Provider Signature | Date | |
| ************************************** | | | | |

First Rehab Appointment: Date: ____ am pm



Please visit our website for additional information: www.SaratogaHospital.org

Instructions for your first appointment with us:

- ✓ Please arrive at your scheduled time, which includes time for necessary paperwork.
- ✓ A parent or guardian must accompany children 17 years old and younger for the first visit in order to sign consent forms, and understand and agree to the plan of care.
- ✓ If you need to reschedule your appointment, we would appreciate at least 24-hour advance notification by calling 518-583-8383.
- ✓ Wear or bring loose fitting attire if we will be evaluating your back, legs or shoulder.
- Be sure to bring your insurance cards, picture ID and this Rehabilitation Referral form to your first visit.
- Call your insurance company before your first visit so you can understand your OUTPATIENT therapy benefits at Saratoga Hospital and be fully informed about your out-of-pocket expenses for rehabilitation care.
- If you are being treated for an on-the-job injury (Workers' Compensation), then please bring the name and phone number of the Workers' Comp insurance contact person.
- ✓ If you are being treated for a motor vehicle-related accident, please bring the claim information and no-fault insurance contact name and phone number.
- Please allow 60 minutes for your first visit, and 30-45 minutes for your other visits.

Direc

| ections to Regional Therapy Center locations: | |
|---|--|
| Church St./Route 9N to Care Lane. Then turn | go over the walkway bridge), Saratoga Springs, 12866 in into lot for 6 Care Lane, building on right. opedic rehab, breast rehab, hand therapy, and |
| - / / / / / - / - / - / - / | hopedic rehab, spine rehab, McKenzie Approach, vestibular/reast rehab, hand therapy, and lymphedema management. |
| | igns for Rte 67 West. Rte 67 East. hopedic rehab, sports injuries, vestibular/balance rehab, post- diatric habilitation, pelvic pain and incontinence, and functional |
| Milton Health Center 510 Cover Pond Polleton | Spc 12020 |

☐ Milton Health Center, 510 Geyser Road, Ballston Spa, 12020

Between the Saratoga County Airport and the Mill Creek Mini Golf.

[PT, orthopedic conditions, breast rehab, spine rehab, McKenzie Approach, and vestibular/balance rehab, post-concussion]

Hours: Monday, Wednesday, Friday 8:30 am to 5:00 pm, Tuesday & Thursday 7:30 am to 5 pm.

☐ The Springs on Weibel Ave., Northway Exit 15, 9 Hampstead Place, Suite 107, Saratoga Springs, NY 12866 Across from the Recycling Center. Turn onto Bliven Way, then left onto Hampstead Pl., Second Bldg on left. [PT, OT, S.P.O.R.T. Services, pelvic pain & incontinence, orthopedic conditions, spine rehab, McKenzie Approach, breast rehab, lymphedema management, and hand therapy]

Hours: Monday – Thursday 8 am to 7 pm, and Friday 8 am to 5 pm

- ☐ Saratoga Hospital, 211 Church Street, Saratoga Springs, 12866
 - For Video Fluoroscopy of Swallow Function, use "Main Entrance" and check-in at Cashiers Desk.