



# Physical Rehabilitation Center of Tulsa

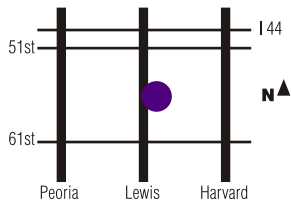
5577 S. Lewis Ave

Tulsa, OK 74105

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## PRC Business Hours

Monday - Thursday

7am - 6pm

Friday

7am - 4pm

Name

Date

Patient Phone Number

Diagnosis

Treatment Precautions

WC

PI

MM

Cash

Medicare

## Referral Request

Eval and Treatment

Eval and Treatment with MedX

MedX (Cervical)

MedX (Lumbar)

Therapeutic Exercise

Joint Mobilization

Traction

## (DRX9000) Eval & Treatment

Spinal Stabilization

Myofascial Release

Ultrasound

Iontophoresis

Electrical Muscle Stimulation

Hot Pack/Cold Pack

Hand Therapy

Paraffin Wax

Home Program

Functional Capacity Evaluation

IME

Xray

Eval Only (MD/DO)

Duration

Comments

### Statement of Medical Necessity

*I certify that secondary to the above noted diagnosis and/or complications, this person is experiencing significant pain/disability and that the prescribed intervention is medically necessary for at least the stated duration to restore normal musculoskeletal, neuromuscular, soft tissue and ADL function.*

Referring Physician

NPI#

Signature

DC DO DPM MD