

PHYSICIAN REFERRAL

Clinics

Pickering
375 Kingston Rd
Pickering, ON L1V 1A3
(905) 492-7375

Patient's Name: _____

Diagnosis: _____

Precautions: _____

- Evaluate and Treat
- Home Program
- Work/Functional Conditioning
- Therapeutic Exercise
- Modalities
- Other _____

Comments: _____

Frequency: ____ x week ____ weeks or ____ visits total

Signature: _____

Date: _____