



# PTSIR

Physical Therapy and Sports Injury Rehabilitation

## PHYSICIAN REFERRAL

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: \_\_\_\_\_

### Clinics

**PTSIR Blue Island**  
13114 Western Ave,  
Suite 3  
Blue Island, IL 60406  
(708) 824-0515

**PTSIR Hazel Crest**  
1816 West 170th St  
Hazel Crest, IL 60429  
(708) 335-1415

**PTSIR Lansing**  
2 River Place, Suite B  
Lansing, IL 60438  
(708) 895-9860

**PTSIR Tinley Park**  
17236 S. Harlem Ave  
Tinley Park, IL 60477  
(708) 633-8379

**PTSIR Orland Park**  
9763 W 143rd St, Suite  
C  
Orland Park, IL 60462  
(708) 226-1991