

ARROYO PHYSICAL THERAPY

BALANCE VESTIBULAR NEURO LIGHT THERAPY ORTHO REHAB SENIOR FITNESS

1030 S ARROYO PARKWAY, SUITE 109, PASADENA, CA 91105

TELE: 626-593-2283

Physician's Referral

PATIENT'S NAME _____ Pt's Tele# _____

DIAGNOSIS: _____

_____ Gait Abnormality/Balance Therapy
(Eval & Treat)

_____ BPPV – Eval and Treat

_____ Neurological Rehabilitation
(Parkinson's, MS, CVA, etc.)

_____ Vestibular/Balance Therapy
(Eval & Treat)

_____ LIGHT (Laser) Therapy
(for neuropathy, soft-tissue injury, pain, etc.)

_____ Community Exercise Class

_____ OTHER (Orthopedic, etc.) _____

Physicians Tele: _____ Fax: _____

Physicians NAME: _____

PLEASE PRINT MD's NAME for LEGIBILITY! THANK YOU!

Physicians Signature: _____ Date: _____

PLEASE SIGN AND FAX TO: 626-593-2284

FREE PARKING IN REAR – HANDICAP ACCESSIBLE