WashU Medicine

Milliken Hand Rehabilitation Center

PHONE: (314) 286-1669
FAX: (314) 627-7129
otservices.wustl.edu

HAND THERAPY REFERRAL

Washington University and Barnes-Jewish Orthopedic Center
14532 S. Outer Forty Rd.
Suite 120
Chesterfield, MO 63017

Center for Advanced Medicine
4921 Parkview Place
Suite 6F
St. Louis, MO 63110

Center for Advanced Medicine Sunset Hills
3630 S. Geyer Rd.
Suite 130
St. Louis, MO 63127

Occupational Therapy Washington Clinic
1631 A. Roy Drive
Washington, MO 63090

PATIENT INFORMATION

Patient Name: _____

Date Of Birth: _____ **Phone:** _____

DIAGNOSIS & SURGERY

Diagnosis: _____ **ICD-10 Code:** _____

Surgery: _____

Date of Surgery: _____ **Date of Onset:** _____

HAND THERAPY ORDERS (OT/PT)

Frequency/Duration: _____ **Next MD Visit:** _____

- ☐ OT/PT Evaluate and Treat
- ☐ AROM
- ☐ PROM
- ☐ Strengthening
- ☐ Edema Management
- ☐ Wound Care
- ☐ Scar Management

Additional Specifications: _____

Restrictions/Precautions: _____

_____

ORTHOSIS

Orthosis Specifications: _____

Purpose of Orthosis: _____

REFERRING PROVIDER

Signature/Printed Name: _____

Phone: _____ **Fax:** _____