## Mary Free Bed® Rehabilitation

## Referral Form

## **MARY FREE BED YMCA**

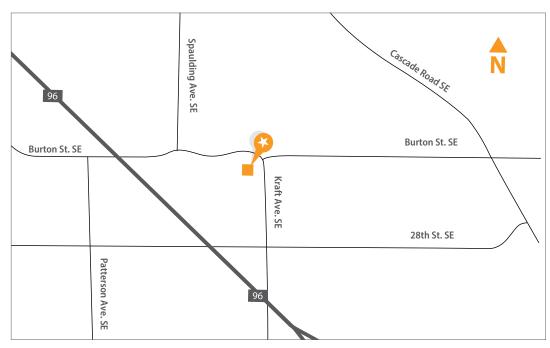
5500 Burton St. SE, Grand Rapids, MI 49546 P: 616.840.8303 (Option 2) F: 616.840.9642

PATIENT INFO	RMATIO	N				
			Phone	Date of Birth		
Address				City	State Zip	
Email				Diagnosis		
Gender Identity:	<b>J</b> Female	☐ Male	□ Non-binary	☐ Transgender Female	☐ Transgender Male ☐ Ot	her
REQUESTED S	ERVICE	<b>E(S)</b>				
☐ Physical Therapy						
☐ Virtual Physical Th	erapy					
☐ Pain Rehabilitation	n with Phys	ical Therapy				
Diagnosis				ICD-10 Code		
☐ Evaluate and Treat						
		cy and Durati	ion			
☐ Post-acute dischar	ge patient	will be follow	ed by primary car			
				PCP Name		
PROVIDER INF	ORMATI	ON				
Name (print)				Signature		
Phone			Fax		 Date	
Select program/service	(on back) c	or list here if ki	nown			

## **SERVICES**

- ☐ Alter G treadmill
- Aquatic therapy
- ☐ Balance and fall prevention
- Bone health
- Dry needling
- ☐ McKenzie Method (spine and extremities)
- Orthopedic rehabilitation
- ☐ Pelvic and abdominal rehabilitation
- ☐ Pre-op rehabilitation

- ☐ Post-op rehabilitation
- ☐ Postpartum physical therapy
- □ Prenatal physical therapy
- Spine rehabilitation
- Sports rehabilitation



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