



DT18123

Children's Healthcare of Atlanta

## REHABILITATION SERVICES ORDER

### Patient Information

First Name: \_\_\_\_\_  
Last Name: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Gender: ☐ Male ☐ Female  
Interpreter Required: ☐ Yes ☐ No Language: \_\_\_\_\_  
Parent/Guardian: \_\_\_\_\_  
Phone (Home): \_\_\_\_\_ Cell: \_\_\_\_\_

### Referring and Medical Diagnosis:

### ICD-10 Code(s):

**AUDIOLOGY EVALUATIONS:** ☐ Hearing Eval, 6+ MO ☐ Newborn Hearing Screening/Follow-up, 0-6 MO

☐ Sedated, **\*OVER 4 mo adjusted age**, Auditory Brainstem Response ☐ Non-Sedated, **\*UNDER 4 mo adjusted age**, Auditory Brainstem Response

**AUDIOLOGY AMPLIFICATION/HEARING DEVICES:** ☐ New Hearing Aid Patient ☐ Established Hearing Aid Patient ☐ Cochlear Implant Services

☐ Bone Conduction Hearing Device for surgical implants ☐ Bone Conduction Hearing Device for softband ☐ Swimplugs/ Musician's Earplugs

**AUDIOLOGY SPECIALTY EVALUATIONS:** ☐ Audiology Vestibular Evaluation ☐ Auditory Processing Eval, 7+ yrs old

**ADVANCED TECHNOLOGY AND ROBOTIC REHABILITATION (OT/PT)** Evaluate and treat as recommended for: ☐ Occupational Therapy ☐ Physical Therapy

**\*\*\*order for Advanced Technology and Robotic Rehabilitation must be signed by a specialist**

**ASSISTIVE TECHNOLOGY (OT/PT/ST)** Evaluate and treat as recommended for:

Date of Last Doctor's Office Visit: \_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_ (GA Medicaid Requirement) Patient's Height: \_\_\_\_\_ ft \_\_\_\_\_ in Weight: \_\_\_\_\_ lbs

☐ Augmentative Communication ☐ Computer Access/Environmental Control Evaluation ☐ Seating and Mobility

**ORTHOTICS & PROSTHETICS** Specify Device \_\_\_\_\_ ☐ With PT Evaluation & Treatment ☐ With OT Evaluation & Treatment

☐ Cranial Remolding Orthosis ☐ Cranial Remolding Orthosis with PT Evaluation & Treatment

**OCCUPATIONAL THERAPY (OT)** Evaluate and treat as recommended for ☐ General OT or choose a specialty OT below

**SPECIALTY OT** ☐ Aquatic Therapy OT, Scottish Rite Aquatics ☐ Constraint Induced Movement Therapy

☐ Serial Casting OT ☐ Splinting ☐ Hand Therapy ☐ Driver Rehabilitation

**PHYSICAL THERAPY (PT)** Evaluate and treat as recommended for ☐ General PT or choose a specialty PT below

**SPECIALTY PT** ☐ Aquatic Therapy PT, Scottish Rite Aquatics ☐ Serial Casting PT ☐ Splinting ☐ Vestibular

**SPEECH-LANGUAGE THERAPY (ST)** Evaluate and treat as recommended for: ☐ General ST with hearing eval if last results are >6 mo old or choose a specialty ST below

**SPECIALTY ST** ☐ Feeding ST, Flexible Endoscopic Evaluation of Swallowing ☐ Oral Pharyngeal Motility Study/Modified Barium Swallow

☐ Voice Disorder

**Physician's State of Medical Necessity and Services:** The above-named individual is currently under my medical care. I have recommended the services/apparatus indicated which is medically necessary for optimal care of the condition for which I have been consulted.

Rehabilitation Potential: Good Fair Poor Recommended Frequency: \_\_\_\_\_ times per \_\_\_\_\_ week or month

Physician's Printed Name: \_\_\_\_\_

**For questions about anything on this order please contact**

Physician's Signature: \_\_\_\_\_

Physician Office Contact's Name: \_\_\_\_\_

Date: \_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_ Time: \_\_\_\_\_ AM PM

Contact's Phone Number: \_\_\_\_\_

Physician's License Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

**Visit [choa.org/rehabprofessionals](http://choa.org/rehabprofessionals) for more information or to reorder this form.**

Some physicians are affiliated healthcare professionals on the Children's Healthcare of Atlanta team are independent providers and are not our employees.

For this service:	Parents, call this number to schedule:	Physicians, fax order to this number:
<b>Rehabilitation/ Audiology (for services not listed below)</b>	404-785-7100	404-785-7113
<b>Hand Therapy</b>	404-785-4611	404-785-3732
<b>Assistive Technology</b>	404-785-3718	404-785-3768
<b>Orthotics and Prosthetics, Cranial Remolding</b>	404-785-3229	404-785-5690
<b>OPMS, FEES - Arthur M. Blank Hospital</b>	404-785-3255	404-785-1158
<b>OPMS, FEES - Scottish Rite and Children's at Webb Bridge (OPMS only at Webb Bridge)</b>	404-785-2270	404-785-5311
<b>Center for Advanced Technology and Robotics Rehabilitation</b>	404-785-4908	404-785-4388
<b>Driver Rehabilitation</b>	404-785-3300	404-785-3270
<b>Aquatics</b>	404-785-0841	404-785-5311
To request an appointment online: <a href="http://choa.org/rehabappointment">choa.org/rehabappointment</a> or <a href="http://choa.org/citapararehabilitacion">choa.org/citapararehabilitacion</a>		

Location	Rehab/ Audiology	Orthotics & Prosthetics
<b>Scottish Rite Campus</b> <b>Scottish Rite Hospital:</b> 1001 Johnson Ferry Road NE, Atlanta, GA 30342 The Center for Advanced Technology and Robotic Rehabilitation, Aquatics, OPMS, and FEES are located inside Scottish Rite Hospital. <b>Medical Office Building at Scottish Rite</b> 5461 Meridian Mark Road NE, Suite 300, Atlanta, GA 30342 <i>A service of Children's at Scottish Rite Hospital</i>	X	
<b>Arthur M. Blank Hospital:</b> 2220 North Druid Hill Road NE, Atlanta, GA 30329 OPMS and Fees are located inside Arthur M. Blank Hospital	X	
<b>Children's at North Druid Hills</b> 1605 Chantilly Drive, Atlanta, GA 30324 <i>A service of Children's at Scottish Rite Hospital</i>	X	
<b>Driver Rehabilitation</b> 993 F Johnson Ferry Road, Suite 260, Atlanta, GA 30342 <i>A service of Children's at Scottish Rite Hospital</i>	X	
<b>Children's at Webb Bridge</b> 3155 North Point Parkway, Building A, Alpharetta, GA 30005 <i>A service of Children's at Arthur M. Blank Hospital</i>	OPMS only	
<b>Children's at Town Center</b> 605 Big Shanty Road NW, Kennesaw, GA 30144 <i>A service of Children's at Scottish Rite Hospital</i>	X	X
<b>Center for Advanced Pediatrics:</b> 2174 North Druid Hills NE, 6th Floor, Atlanta, GA 30329 <i>A service of Children's at Scottish Rite Hospital</i>		X
<b>Children's at Duluth</b> 2270 Duluth Highway 120, Suite 200, Duluth, GA 30097 <i>A service of Children's at Scottish Rite Hospital</i>		X
<b>Children's at Fayette</b> 1250 Highway 54 West, Suite 200, Fayetteville, GA 30214 <i>A service of Children's at Scottish Rite Hospital</i>		X
<b>Children's at Forsyth</b> 410 Peachtree Parkway, Suite 300, Cumming, GA 30041 <i>A service of Children's at Scottish Rite Hospital</i>		X
<b>Children's at Meridian Mark</b> 5445 Meridian Mark Road, NE, Suite 200, Atlanta, GA 30342 <i>A service of Children's at Scottish Rite Hospital</i>		X
<b>Children's at Old Milton Parkway</b> 3300 Old Milton Parkway, Suite 370, Alpharetta, GA 30005 <i>A service of Children's at Scottish Rite Hospital</i>		X

Visit [choa.org/locations](http://choa.org/locations) for door-to-door driving directions.