Outpatient Rehabilitation Services (OT/PT/ST)	Referral Guide: Page 1 of 1	Ortho
Diagnosis/Definition:		

Initial Diagnosis and Management:

Physical Therapy: Determine presence of impaired mobility skills including gait, transfers, balance and coordination.

Occupational Therapy: Determine presence of impaired activity of daily living skills.

Speech Therapy: Determine presence of impaired communication skills and/or swallowing function.

Ongoing Management and Objectives:

To improve the patient's functional capabilities and independence through the application of rehabilitative interventions.

Indications for Specialty Care Referral:

Consult physical therapy for mobility impairments including: strength and range of motion deficits, balance and coordination disorders, prosthetic and orthotic training, pain management and wound care.

Consult Occupational Therapy for impairments of activities of daily living, home safety evaluation, upper extremity function, cognitive evaluation, work performance evaluation, recommendation for use of assistive and adaptive equipment.

Consult Speech Therapy for impairments of speech and language skills, cognition, voice quality and swallowing function.

Test(s) to Prepare for Consult:	Test(s) Consultant May Need To Do:
Pain assessment Strength/range of motion assessment Cognitive assessment	Physical Therapy consultant may conduct strength tests, balance tests, and/or mobility evaluations and other tests to determine mobility and safety performance.
Communication assessment Mobility assessment	Occupational Therapy may conduct cognitive testing, work capacity
Self care/ADL assessment Feeding assessment	evaluation, home safety evaluation and other tests to determine activity of daily living skills.
Swallowing assessment	, ,
	Speech Therapy may conduct cognitive/linguistic tests, and/or swallowing tests to determine communication skills and aspiration risk.

Criteria for Return to Primary Care:

Upon discharge from Rehabilitation Services.

Upon development of suspected medical complications and/or impediments to expected course of progress, as indicated.

PLEASE DO NOT REFER THE FOLLOWING PATIENT TYPES TO REHABILITATION SERVICES:

- -Recent admission to therapy for same diagnosis.
- -Custodial care not requiring the skills of a therapist.
- -No reasonable expectation for progress or prevention of further notice.

Revision History: Created Revised

Disclaimer: Adherence to these guidelines will not ensure successful treatment in every situation. Further, these guidelines should not be considered inclusive of all accepted methods of care or exclusive of other methods of care reasonably directed to obtaining the same results. The ultimate judgment regarding the appropriateness of any specific procedure, therapy, or referral must be made by the physician/provider in light of all circumstances presented by an individual patient.