

PELVIC FLOOR REHABILITATION PROGRAM INFORMATION & REFERRAL FORM

Patient Name: _____ **DOB:** _____ **Date:** _____

Parent name: _____ **Phone Number:** _____

PATIENT INFORMATION

Current Medications:

- | | |
|--|--|
| <input type="checkbox"/> Miralax (stool softener) | <input type="checkbox"/> Cardura & Flomax (relaxes bladder neck) |
| <input type="checkbox"/> Ditropan (anticholinergic: relaxes bladder) | <input type="checkbox"/> DDAVP (decreases urine production) |
| <input type="checkbox"/> Detrol (anticholinergic: relaxes bladder) | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Levsin (anticholinergic: relaxes bladder) | <input type="checkbox"/> Other: _____ |

Surgeries:

Date: _____ Type: _____

Tests:

- | | | |
|-----------------------------------|-------------|----------------|
| <input type="checkbox"/> PVR | Date: _____ | Results: _____ |
| <input type="checkbox"/> VCUG | Date: _____ | Results: _____ |
| <input type="checkbox"/> Flow EMG | Date: _____ | Results: _____ |

Other: _____

DIAGNOSIS

- Vesicouretral Reflux (593.70)
- Constipation (564.00)
- Constipation with Fecal Incontinence (787.6)
- Urinary Incontinence (788.30)
- Urge Incontinence (788.31)
- Mixed Urinary Incontinence – Urge & Stress (788.33)
- Urinary Frequency (788.41)
- Other: _____

REFERRAL

Physical and/or Occupational Therapy evaluation and treatment is recommended secondary to:

- | | |
|--|---|
| <input type="checkbox"/> Overactive Bladder (urge incontinence) | <input type="checkbox"/> Underactive Bladder |
| <input type="checkbox"/> Dysfunctional voiding (dysfunction <i>during</i> voiding) | <input type="checkbox"/> Pelvic floor muscle hypertonus |
| <input type="checkbox"/> Atonic or hypotonic sphincter | <input type="checkbox"/> Other: _____ |

Print Physician's Name: _____

Physician's Signature: _____

Schedule this patient for pelvic floor rehabilitation evaluation and treatment at the following All Children's Hospital location:

<input type="checkbox"/> Main Campus St. Petersburg	727-767-4257	FAX 727-767-8847	<input type="checkbox"/> Specialty Care of Lakeland	863-802-6600	FAX 863-802-6639
<input type="checkbox"/> Specialty Care of Brandon	813-436-5900	FAX 813-436-5901	<input type="checkbox"/> Specialty Care of Pasco	727-846-9900	FAX 727-834-5421
<input type="checkbox"/> Specialty Care of Carillon	727-571-1210	FAX 727-573-1958	<input type="checkbox"/> Specialty Care of Sarasota	941-927-8805	FAX 941- 925-6339
<input type="checkbox"/> ACTC East Lake	727-786-5482	FAX 727-786-5595	<input type="checkbox"/> Specialty Care of Tampa	813-631-5000	FAX 813 631-5040
<input type="checkbox"/> Specialty Care of Ft Myers	239-931-5700	FAX 239-931-5738			