



BLUE SPACE CLINIC PHYSIOTHERAPY

A Healthier, Happier World!

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Address : Suite 201, 621 Sheppard Avenue E
Toronto, ON. M2K 1B5 (Accessible)

PHYSIOTHERAPY REFERRAL

Date:

Patient:

Age:

Diagnosis:

Treatment Requested:

Referring Clinician:

(Complete or stamp) Name:
Phone:

License #:
Fax:

MSK

- ☐ Acute MSK Injury
- ☐ Chronic MSK Issue
- ☐ Spine pathology/ Back Pain
- ☐ Rheumatoid Arthritis
- ☐ Osteoarthritis
- ☐ Osteopenia/ Osteoporosis
- ☐ TMJ
- ☐ Chronic Pain/ Pain Mgmt
- ☐ Other: _____

Cardiorespiratory Rehab

- ☐ Cardiac Rehabilitation
- ☐ Cystic Fibrosis
- ☐ Long COVID

Custom Bracing

Indication: _____
Joint: _____

Dizziness, Balance & Vestibular

- ☐ BPPV/ Vertigo
- ☐ Vestibular Neuritis/ Labyrinthitis
- ☐ Unilateral / Bilateral Hypofunction
- ☐ Meniere's Disease
- ☐ Vestibular Migraine
- ☐ Cervicogenic Dizziness
- ☐ Dizziness post stroke
- ☐ Poor balance/ Falls Training
- ☐ Other: _____

Pediatrics

- ☐ Cerebral Palsy
- ☐ Muscular Dystrophy
- ☐ Spinal Muscular Atrophy
- ☐ Juvenile Idiopathic Arthritis
- ☐ Delayed Motor Milestones
- ☐ Scoliosis
- ☐ Other: _____

Concussion

- ☐ Acute Concussion (First)
- ☐ Acute Concussion (Prior history)
- ☐ Post-Concussion Syndrome
- ☐ Autonomic Dysfunction (post concussion)
- ☐ Headaches (Cervicogenic/ other)
- ☐ Vision Issues
- ☐ Return to School
- ☐ Return to Work/ Daily Function
- ☐ Return to Sports

Neuro

- ☐ TBI/ ABI
- ☐ Stroke
- ☐ Spinal Cord Injury
- ☐ MS
- ☐ Parkinson's
- ☐ Guillain Barre syndrome
- ☐ Other: _____

Surgery Rehabilitation

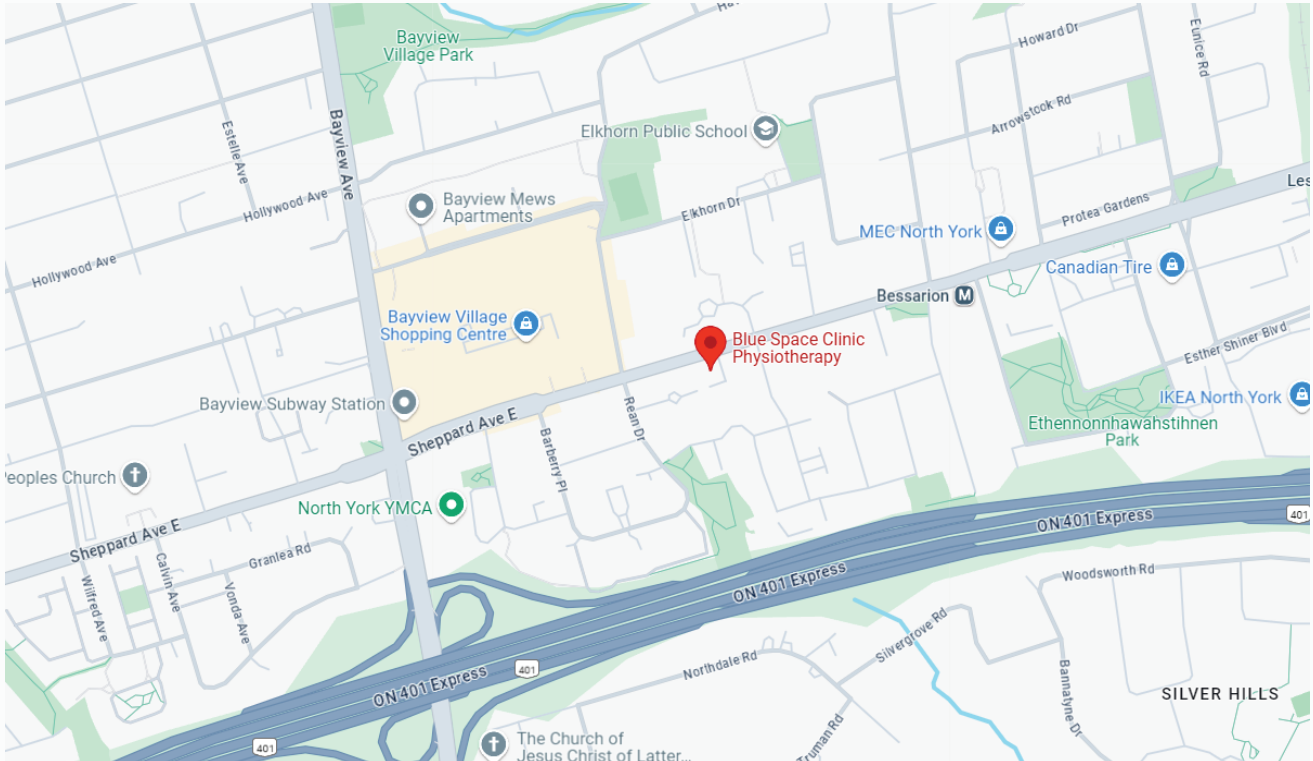
- ☐ Pre-Op Rehabilitation
 - ☐ Post-Op Rehabilitation
- Surgery: _____
Precautions: _____

Thank you for trusting us with your patients' health. We will communicate your patients' progress for ensured continuity of care.

Need more referral pads?

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Contact us to book your appointment



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