



Elise Marie OT

Occupational Therapy • Terapia Ocupacional

Occupational Therapy Referral Form

Elise Pagel, MSOT, OTR/L

Elise Marie OT, LLC: Mobile Outpatient Occupational Therapy

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Phone: 920-585-0698

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Patient Name: _____ DOB: _____

Patient Medicaid Member ID #: _____

Caregiver Name: _____ Caregiver Phone #: _____

Physician/Nurse Practitioner/Physician's Assistant Signature and Reason for Referral: OT evaluation is medically necessary to determine Plan of Care for OT services to support child with the following medical condition(s):

List relevant ICD-10 codes here:

Provider Name: _____ Provider NPI #: _____

Provider email address: _____ Phone #: _____

Provider Signature: _____ Date: _____

When signed by a medical provider (MD, NP, or PA), this form acts as a prescription for therapy services to be provided by Elise Pagel, MSOT, OTR/L from Elise Marie OT, LLC.

ICD-10 codes Commonly used for Occupational Therapy Treatment

482 - Specific Developmental Disorder of Motor Function

F909 - Attention-deficit Hyperactivity Disorder, unspecified type

F84 - Pervasive Developmental Disorders

F840 - Autistic Disorder

R27 - Lack of Coordination

M6281 - Muscle Weakness (generalized)

F98.8 - Other Specified Behavior and Emotional Disorders

R-62 - Lack of Expected Normal Physiological Development

R-620 - Delayed Milestone in Childhood

R6251-Failure to Thrive

R633 - Feeding Difficulties

R625 - Other and Unspecified Lack of Expected Normal Physiologic development in childhood

F98.9 - Unspecified behavioral and emotional disorders

R44.8 Other and unspecified symptoms and signs involving general sensations and perceptions

Please Return Completed Form Via Secure Email to: Elise@elisemarieot.com OR Fax: (833) 251-6556