

**PATIENT INFORMATION**

Name  DOB  Sex  Male  Female

Address  City  State  ZIP

Phone (home)  (cell)  (work)

Email  Emergency Contact

**INSURANCE / PAYMENT INFORMATION**

Medicare Part B:  Yes  No Medicare Advantage Plan:  Yes  No Private Pay:  Yes  No

Primary insurance <input type="text"/>	Secondary insurance <input type="text"/>
ID/Policy # <input type="text"/>	ID/Policy # <input type="text"/>
Group # <input type="text"/> Phone # <input type="text"/>	Group # <input type="text"/> Phone # <input type="text"/>
Relationship to Patient <input type="radio"/> Self <input type="radio"/> Spouse <input type="radio"/> Parent <input type="radio"/> Other	Relationship to Patient <input type="radio"/> Self <input type="radio"/> Spouse <input type="radio"/> Parent <input type="radio"/> Other
Other info <input type="text"/>	Insured Name <input type="text"/> DOB <input type="text"/>

**RESPONSIBLE PARTY (OTHER THAN PARENT)**

Is any other person financially responsible for patient services?  Yes  No Responsible Party Name:

Send Invoice to this person? if so, list contact details below. Relationship to Patient  Self  Spouse  Parent  Child  Other

Address  City  State  ZIP

Phone (home)  (cell)  (work)

Other Info

**PRIOR TREATMENT**

Have you received physical/speech/or occupational therapy with us or with another clinic this calendar year?  Yes  No

If yes, state reason for treatment

Have you received any IN-HOME health, nursing, physical, occupational or speech therapy visits in the past 30 days?  Yes  No

If yes, last treatment date  Last in-home provider name  Phone

Have you been discharged from this treatment?  Yes  No (discharge date)



**MEDICAL INFORMATION**

Reason For Services:

Past Medical History:

Referring physician's name:  Practice Name:  Phone

Primary physician's name:  Practice Name:  Phone

Diagnosis (for physical therapy)

Other info:

**REFERRAL INFORMATION**

**How were you referred to Advance at Home Physical Therapy?**

Physician referral (Name)

Friend/family referral (Name)

Our website

Newspaper Ad

General Internet Search

Other