

Arrigan Rehabilitation Center

249 Blackstone Boulevard, Providence, RI 02906-5815
Phone: (401) 243-1200 | Fax: (401) 222-3887 | Web: www.dlt.ri.gov/arrigan

For timely processing, referrals require a **medical diagnosis, signature of referring medical provider, date of referral, attachment of most recent medical report(s), diagnostics and completion of the information below.** We will report regularly on the progress of your patient. **Please fax this completed referral to 401-222-3887.**

Referral For:

Patient's Name: _____ Last 4 digits of Soc. Sec.# _____ Date of Birth: _____

Patient's Phone Number: _____ Patient's Email: _____

Address (Street, City/Town, State, Zip): _____

Insurance Company: _____ Case Manager: _____ Date of Injury: _____

Interpreter Needed? Yes No If yes, what language? _____

<p>Referral For: (Check One Only): <input type="radio"/> Evaluation & Treatment as per Arrigan Center recommendation OR <input type="radio"/> Evaluation & Treatment ONLY as indicated below</p>

Physical or Occupational Therapy(based on injury):

- Therapeutic Exercises
- Body Mechanics Training
- Splint Fabrication
- Aquatic Therapy
- Massage Therapy/Reiki
- Work Hardening (Progressive Work Simulation)
(objective is to restore physical capacity and function to enable the injured worker to return to work, or minimize physical restrictions in functional capabilities relevant to the patient's occupation)
- Functional Capacity Evaluation
(specialized assessment of an injured worker's ability to safely perform activities as they relate to their present, former, and/or future employment)

- Cognitive Recovery Program/Long COVID Recovery Program
(complex injuries resulting from motor vehicle accidents, mild traumatic brain injuries, assaults/physical altercations, cervical injuries with persistent headaches and illness such as post-acute sequelae of COVID-19 or Long COVID)
- Chronic Pain Management Program
(chronic anatomical or non-anatomical pain and pain related behaviors; ideal for those experiencing delayed recovery from their work injury)
- Rehabilitation Psychology
(psychological eval/counseling to assist injured workers in addressing issues arising from their injury that have added distress, so they do not pose barriers to recovery from their injury)
- Vocational/Career Counseling
(assistance with return to work, career change, training, retraining, adjustment to disability and other vocational/career needs)
- Early Assistance Program (patients 2-20 weeks post injury/illness)
(skilled coach develops roadmap to recovery with workers and supports them as they heal, restore function and stay at work/return to work)

Diagnosis(es): Required for all referrals

Referring Healthcare Provider Comments/Clinical Restrictions:

Referring Healthcare Provider Signature and Date - Required for all referrals

Signature: _____ Date: _____

Name (Print): _____ Telephone: _____