ONCOLOGY REHABILITATION MEDICINE REFERRAL FORM

REFERRING PHYSICIAN: __________________________________________________________________________

CANCER DIAGNOSIS: __________________________________________________________________________

REASON FOR REFERRAL:

☐ Pain (For patients with no evidence of disease)
  A. Consider a Palliative Care Consult for patients with Pain and currently have an active cancer diagnosis and/or psychosocial needs.
  B. Consider an Anesthesia Pain Consult if patient has active disease and is a surgical referral or needs a specific intervention, i.e. celiac plexus block, epidural placement.

☐ Joint Injection
☐ Fatigue
☐ Weakness
☐ Muscle Spasms
☐ Neuropathy
☐ Myopathy
☐ Deconditioning
☐ Contractures
☐ Trismus/Swallowing and Chewing Problems
☐ Radiation Fibrosis
☐ Dystonia
☐ Spasticity
☐ Lymphedema
☐ Amputation
☐ Gait Disorder, Poor Balance/Recent Falls
☐ Other ______________________________________________________________________________________

ROUTINE ____________                       URGENT ____________

NOTES: ______________________________________________________________________________________

SIGNATURE: _______________________________    DATE: ________________________________

Preferred Clinic Location:

South [ ]
1000 E. 101st Terrace
Kansas City, MO 64132
P - (816) 333-1326
F - (816) 333-0086

Lee’s Summit [ ]
4881 NE Goodview Circle
Lee’s Summit, MO 64064
P - (816) 478-2050
F - (816) 478-6360

Westwood [ ]
2330 Shawnee Mission Pkwy.
Westwood, KS 66205
P - (913) 588-1227
F - (913) 588-6765

Indian Creek [ ]
10730 Nall Ave., Ste. 200
Overland Park, KS 66211
P - (913) 588-1227
F - (913) 945-9838
Lee's Summit 1
4881 NE Goodview Circle
Lee's Summit, MO 64064
Phone: 816.478.2050
Main Fax: 816.478.6360
Intake Fax: 816.841.1333
Diagnostic Imaging Scheduling: 913.234.0482

South 2
1000 East 101st Terrace
Kansas City, MO 64131
Phone: 816.333.1326
Main Fax: 816.333.0086
Intake Fax: 816.841.1321
Diagnostic Imaging Scheduling: 913.234.0482

Richard and Annette Bloch Cancer Care Pavilion 3
2330 Shawnee Mission Parkway
Westwood, KS 66205
Phone: 913.588.1227

Indian Creek 4
10730 Nall Ave., Suite 200
Overland Park, KS 66211
Phone: 913.558.1227
Fax: 913.945.9838