



Marshall

Therapy & Sports Rehab

Physical and Occupational Therapy Physician Order

Date: _____

Patient's Name: _____

DOB: _____ Phone Number: _____

Diagnosis: _____

Order: *Evaluate and treat as determined by therapist.*

Speech Therapy (offered only at North Campus at this time)

Frequency & Duration of Treatment: _____

Ordering Physician: _____

_____/_____/_____ :_____ AM / PM

Physician's Signature

Date

Time

Marshall Therapy & Sports Rehab - North

Marshall Medical Center North Campus

40 Medical Park Drive
Guntersville, AL 35976
256.571.8857
256.571.8860 (Fax)

Marshall Therapy & Sports Rehab - South

Across from Marshall Medical Center South's ER

605 Corley Ave
Boaz, AL 35957
256.891.1226
256.840.3288 (Fax)

For more information, visit www.mmcenters.com/facilities