Easter Seals Central Texas

Outpatient Rehab Program (CORP) and Early Childhood Intervention (ECI)

Please fax referral to Easter Seals Central Texas or call to schedule an appointment.
A copy of this form is required for initial evaluation.

Treatment Site - CORP and ECI			**CORP Only**	
☐ 1611 Headway Circle #2 Austin, Texas 78754 Phone: 512.478.2581 Fax: 512.476.1638			☐ 2120 N. Mays, Suite 110 Round Rock, TX 78664 Phone: 512.310.2160 Fax: 512.341.0831	
Patient Information				
Patient Name:		DOB:	Sex: ☐M ☐F	
Street Address:		City:	Zip:	
Parent Full Name:				
Home Phone:		Work Phone:		
Treatment Information				
☐ Evaluate and Treat:	Frequency:__________times per week			
Treatment Disciplines: ☐ Physical Therapy ☐ Occupational Therapy ☐ Speech Therapy ☐ Audiology ☐ Hydrotherapy				
Diagnosis: ☐ 299.00 Autism ☐ 299.90 Pervasive Developmental Delay ☐ 307.00 Stuttering ☐ 314.00 ADD ☐ 314.01 ADHD ☐ 315.20 Learning Disability ☐ 315.30 Speech and Language Deficits ☐ 315.32 Language Delay ☐ 315.39 Speech Delay ☐ 315.40 Developmental Coordination Disorder ☐ 343.90 Cerebral Palsy	☐ 389.00 Hearing Loss ☐ 438.81 Apraxia of Speech ☐ 719.70 Difficulty in Walking ☐ 741.00 Spina Bifida ☐ 758.00 Down Syndrome ☐ 781.20 Abnormality of Gait ☐ 781.30 Lack of Coordination ☐ 784.69 Apraxia (non-speech) ☐ 787.20 Dysphagia ☐ 784.40 Voice Disturbance ☐ 478.50 Other Diseases of Vocal Cords ☐ 783.42 Delayed Milestones ☐Other___________________________________			
Description of Concerns ____ ____ **Practice Information**				
Practice Name:		Ordering Physician:		
Address:		Fax:		
Phone:		UPIN #:	NPI #:	
Physician Full Name (printed):				
Physician Signature: ____			Date:	

Transportation services are available in Austin to those who qualify. Please call **512.478.2581** for more information.