

Clinical Chart

REGULAR W/C APPLICANT & PAIN REFERRAL

LEGAL

LEFT SIDE

- 🍇 PATIENT SIGN IN FORM
- 🍇 COPY OF LOG SHEET (CHART NOTES)
- 🍇 COPY OF PATIENT INFORMATION SHEET (1ST PAGE OF P/W INTAKE SHEET.)
- 🍇 COPY OF THE PRESCRIPTION FORM SIGNED BY DOCTOR OR AN ATTORNEY REFERRAL LETTER INDICATING TYPE OF REFERRAL REQUEST.
- 🍇 COPY OF DOCTOR'S FIRST REPORT (PINK FORM)
- 🍇 COPY OF PROOF OF SERVICE
- 🍇 COPY OF INSURANCE AUTHORIZATION & PROOF OF SERVICE
- 🍇 AGREEMENT FOR TREATMENT 6-8 WEEKS
- 🍇 TREATMENT AND ARBITRATION AGREEMENT
- 🍇 RELEASE OF MEDICAL RECORDS AUTHORIZATION FORM
- 🍇 AGREEMENT OF RECEIPT OF NOTICE OF PRACTICES
- 🍇 2 GREEN LIENS (SIGNED WITH PATIENT INFO FILLED OUT COMPLETELY)

**NOTE: AS PT. PROGRESSES THROUGH TREATMENT IF YOU RECEIVE ANY LEGAL CORRESPONDENCE AFTER YOU'VE DEALT WITH IT ACCORDINGLY YOU FILE ON LEFT SIDE UNDER COPY OF PATIENT INFORMATION FORM.
ALSO MAKE SURE ALL FORMS ARE FILLED OUT COMPLETELY.*

MEDICAL

RIGHT SIDE

- 🍇 COPY OF PATIENT HISTORY OF INJURY
 - 🍇 THERAPY NOTES
 - 🍇 PR2'S
 - 🍇 SUPPLEMENTAL REPORT NOTES (PSYCHIATRIST /P.A VISITS)
 - 🍇 PRESCRIPTIONS
 - 🍇 ANY MEDICAL NOTES PERTAINING TO THE PATIENT.
- INITIAL REPORT & WHEN PT. FINISHES TX. EITHER P&S OR PAIN DISCHARGE REPORT.**

**NOTE: ALL CHARTS MUST BE IN THE COLOR OF THE TYPE OF REFERRAL IT IS.
GREEN=APPLICANT W.C/BLUE=PAIN/YELLOW P.I
RED=DEFENSE. IF THE PATIENT IS AN INDUSTRIAL PSYCHIATRIC NETWORK PATIENT ALL FORMS MUST HAVE THE I.P.N LETTERHEAD
INCLUDING ALL AGREEMENTS AND DOCTOR FORMS.
*ON THE OUTSIDE FRONT TOP OF CHART YOU NEED TO INDICATE REFFERAL SOURCE (DOCTOR OR ATTORNEY NAME)
ON THE BOTTOM RIGHT CORNER INDICATE I.E & P&S DATES.IF IT IS A PAIN REFFERAL INCLUDE FINAL DISCHARGE DATE SINCE THOSE REFERRALS DO NOT REQUIRE A P&S.

I, _____ THE MANAGER OF THIS LOCATION UNDERSTAND AND AM FULLY AWARE OF THE PROPER FORMAT IN WHICH TO ORGANIZE ALL CLINICAL CHARTS AND AGREE TO FOLLOW THESE PROCEDURES.

DATE: _____

SIGNATURE: _____