

# DMRclinics Referral Form

**Hopkins Health & Wellness**

Phone: 952-933-5085  
 Fax: 952-931-2159  
 PT@HopkinsWellness.com  
 15 8<sup>th</sup> Avenue North  
 Hopkins, MN 55343

**DMR Clinic Woodbury**

Phone: 651-621-8803  
 Fax: 651-757-4099  
 Darak@DMRwoodbury.com  
 1687 Woodlane Drive, #201  
 Woodbury, MN 55125

**Blaine Health & Wellness**

Phone: 763-703-3509  
 Fax: 763-703-3454  
 Blainehealth@gmail.com  
 1630 101<sup>st</sup> Ave. Ste 140  
 Blaine, MN 55449

**HHWC North Lakes Area**

Phone: 218-568-5648  
 Fax: 218-568-5698  
 Frontdesk@Lakeswellness.com  
 31108 Government Drive  
 Pequot Lakes, MN 56472

Patient Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Diagnosis: \_\_\_\_\_

Onset/DOI: \_\_\_\_\_ Insurance: \_\_\_\_\_ Phone: \_\_\_\_\_

**Williams Integracare Clinic**

Phone: 320-251-2600  
 Fax: 320-251-4763  
 info@integracareclinics.com  
 100 South 2<sup>nd</sup> Street  
 Sartell, MN 56377

Evaluate & Treat Frequency: \_\_\_\_\_/wk Duration: \_\_\_\_\_ Weeks Total Visits: \_\_\_\_\_

**General Physical Therapy & Sports Rehabilitation**

**Exercise/Fitness**

- Posture/Body Mechanics
- Stretching/Flexibility
- Passive ROM
- Active/Assistive ROM
- Balance/Stability Training
- Proprioceptive Exercise Training
- Core Strengthening
- Stabilization/Strengthening
- Home Exercise Program
- Progressive Fitness
- Return to Sports Rehab

**Manual Therapy**

- Dynamic Muscle Technique (DMT)
- Active Release Therapy (ART)
- Craniosacral Therapy
- Myofascial Release
- Deep Tissue Release
- Trigger Point Release
- Motion Assisted Muscle Release
- Soft Tissue Mobilization
- Integrated Progressive Mobilization (IPM)
- Spinal Manipulative Therapy

**Modalities, Braces & Supplies**

- Cold Laser
- Traction  Cervical  Lumbar
- Ultrasound
- Interferential E Stim
- Game Ready
- Kinesiotaping
- Brace/Support: \_\_\_\_\_
- Tens Unit
- Orthotics
- Home Traction  Cerv  Lumb

Other: \_\_\_\_\_

**DMR Method**

DMR Method Evaluate and Treat

Lumbar  Cervical  Other: \_\_\_\_\_

Acute  Chronic

Limited (6-12 visits) strain/sprains, non-radicular pain, minor sports injuries

Progressed (12-20 visits) facet syndrome, headaches, sciatica, cervicobrachial syndrome

Advanced (20-24 visits) disc herniation, DDD, spondylolisthesis, stenosis, post-operative

Special instructions: \_\_\_\_\_

**Other Services**

Chiropractic Integrated Progressive Mobilization (IPM)

Massage Therapy

Deep Tissue  Sports  Myofascial  Craniosacral

Dry Needling

This form is a Prescription and a Statement of Medical Necessity and is valid with any licensed physical therapist in Minnesota.

Physician Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Clinic:

Fax: