

**Referral for Rehabilitation Services
Pelvic Health Physical Therapy**

Phone: 713-521-0020 or 1.888.301.8477
Fax: 713.874.1798 memorialhermann.org

Date: _____ Precautions: _____
 Patient Name: _____ Phone: _____
 Diagnosis: _____ ICD Code: _____
 Date of Injury: _____ Date of Surgery: _____ Procedure: _____
 Frequency (Days/week) _____ for Duration: _____ weeks
 Physical Therapy Evaluate & Treat Reason for Referral: _____

BACK PAIN

- Low Back Pain M54.50
- Radiculopathy M54.10
- Sacrococcygeal (Coccygodynia) _____
- Sciatica M54.30
- SI Joint _____
- Other: _____

BOWEL

- Coccygodynia _____
- Constipation K59. _____
- Fecal Incontinence R15.9
- Full Incontinence of Feces R15.9
- Fecal Smearing R15.1
- Fecal Urgency R15.2
- Flatulence R14.3
- Incomplete Defecation R15.0
- Irritable Bowel Syndrome K58.1
- Obstructive defecation N13.9
- Proctalgia Fugax K59.4
- Slow Transit Constipation K59.01

PELVIC INJURY

- Abdominal Pain R10. _____
- Dysmenorrhea N94. _____
- Ehlers-Danlos Syndrome Q79. _____
- Lower Abdominal Pain R10.30
- Pelvic Muscle Wasting N81.84
- Perimenopause/Menopause N95. _____
- Sacrococcygeal (Coccygodynia) _____
- Stress Fracture of Pelvis M84.350 _____

PELVIC PAIN

- Anal Spasms K59.4
- Bladder Pain R39.82
- Dyspareunia N94.1 _____
- Endometriosis N80. _____
- Erectile Dysfunction N52. _____
- Interstitial Cystitis N30. _____
- Levator Spasm _____
- Pelvic & Perineal Pain R10.2
- Premature Ejaculation F52.4
- Proctalgia Fugax K59.4
- Prostatodynia N42.81
- Sexual Pain Dysfunction _____
- Scrotal Pain N50.82
- Vaginismus N94.2
- Vulvar Vestibulitis N94.810
- Vulvodynia N94.81 _____

PROLAPSE

- Cystocele N81.1 _____
- Female Genital Prolapse N81.9
- Rectocele N81.6
- Urethrocele N81.0
- Uterovaginal Prolapse N81. _____

URINARY

- Incomplete Bladder Emptying R39.14
- Interstitial Cystitis N30.1 _____
- Neurogenic Bladder N31. _____
- Nocturia R35. _____
- Nocturnal Enuresis N39.44

URINARY (Con't)

- Mixed Incontinence N39.46
- Overactive Bladder N32.81
- Overflow Incontinence N39.490
- Poor/Weak Stream R39.12
- Post-Void Dribble N39.43
- Splitting of Stream R39.13
- Stress Urinary Incontinence N39.3
- Urge Incontinence N39.41

PRENATAL/POST-PARTUM

- Broad Ligament Pain C57.1 _____
- Diastasis Recti M62.81
- Posture Dysfunction _____
- Pubic Symphysis Separation O26.72
- Pubic Symphysis Sublux O26.71 _____
- Round Ligament Pain C57.2 _____
- Traumatic Rupture Pubic Symphysis S33.4XX
- Other: _____

PRE/POST-OP

- Bladder Lift _____
- Enlarged Prostat D29.1
- Gender Affirmation _____
- Hysterectomy _____
- Pelvic Organ Prolapse Repair _____
- Robotic Radical Prostatectomy _____

PROCEDURES

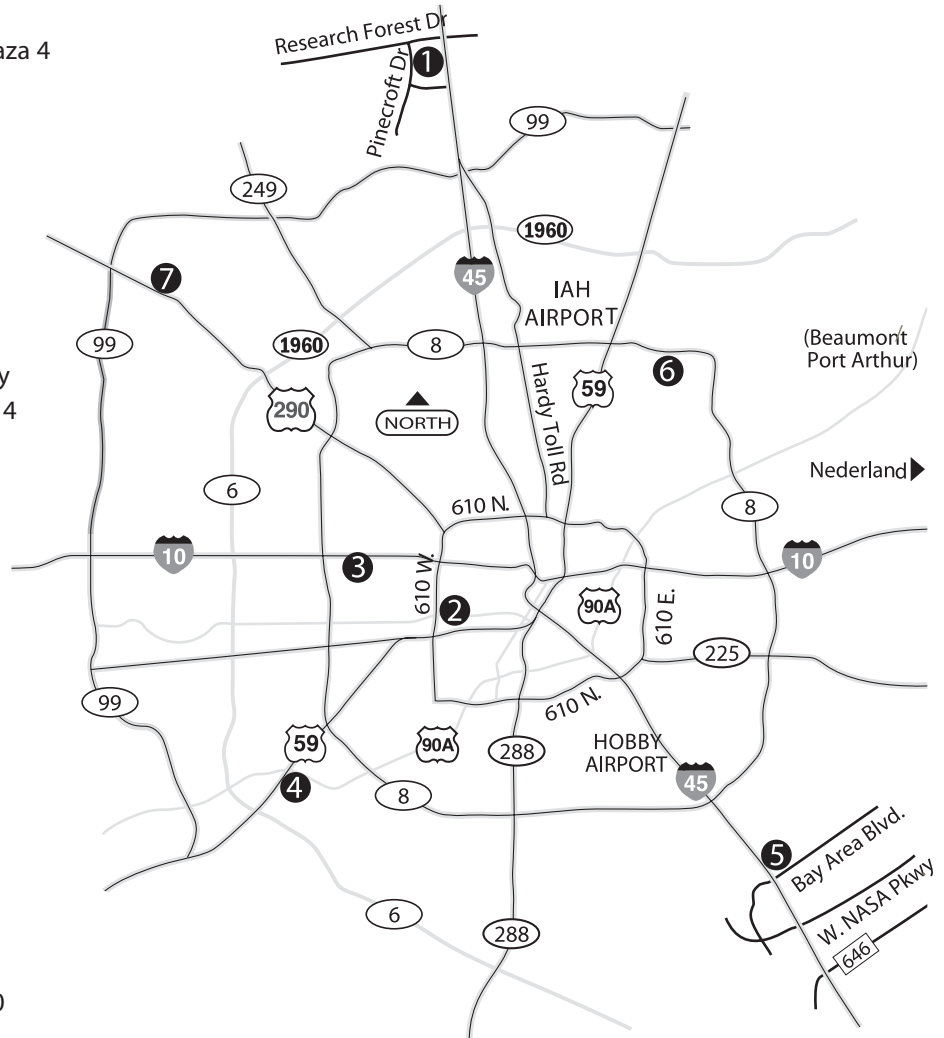
- Biofeedback
- Bladder Training
- Bracing
- Coccyx Mobilization
- Dry Needling
- Electrical Stimulation
- Home Exercise Program
- Labor & Delivery Strategies
- Pelvic Floor Strengthening
- PTNS- Percutaneous Tibial Nerve Stimulation (PFHC location)
- Scar Mobs
- Taping
- _____

Signature _____ Physician Print Name _____ NPI/MHHS ID. _____ Date _____ Time AM PM Contact No. _____
Physician signature required, stamp is not valid



Pelvic Floor Health Locations

- 1 Memorial Hermann Sports Medicine & Rehabilitation – The Woodlands
9180 Medical Plaza, Suite 200, Medical Plaza 4
The Woodlands, TX 77380
P: 713.897.2549 F: 713.897.2544
- 2 Memorial Hermann Sports Medicine & Rehabilitation – Greenway Plaza
3651 Wesleyan St., Suite 110
Houston, TX 77027
P: 713.850.8472 F: 713.850.8490
- 3 Pelvic Floor Health Center – Memorial City
925 Gessner Rd., Suite 350, Medical Plaza 4
Houston, TX 77024
P: 713.295.8201 F: 713.295.8215
- 4 Memorial Hermann Sports Medicine & Rehabilitation – Williams Trace
14857 Southwest Fwy.
Sugar Land, TX 77478
P: 281.242.8900 F: 281.242.0355
- 5 Memorial Hermann Sports Medicine & Rehabilitation – Webster
19419 Gulf Fwy., Suite 3
Webster, TX 77598
P: 281.488.2815 F: 281.488.2844
- 6 Memorial Hermann Sports Medicine & Rehabilitation – Fall Creek
9522 N. Sam Houston Pkwy. E., Suite 2330
Humble, TX 77396
P: 713.814.2510 F: 713.704.3890
- 7 Memorial Hermann Sports Medicine & Rehabilitation – Cypress
27700 Northwest Fwy., Suite 130
Cypress, TX 77433
P: 346.231.6900 F: 346.231.6901



For Appointments and Scheduling:

P: 713.521.0020 or 1.888.301.8477

F: 713.874.1798 or 1.888.504.8477

memorialhermann.org/pelvicfloorpt

**MEMORIAL
HERMANN**
Sports Medicine &
Rehabilitation

memorialhermann.org/pelvicfloorpt