



Alder Crossing 6-3268 King George Blvd Surrey BC V4P 1A5  
tel: 604-385-3358 fax: 604-357-5488 email: info@solaj.ca

## Physiotherapy Referral Form

- Pain Management
- Core Stabilization
- Exercise Therapy
- IMS – Dry Needling
- Acupuncture
- Cupping Therapy
- Work/ICBC Injury Rehabilitation
- Sports Injury Rehabilitation
- Post-Surgical Rehabilitation
- Ultrasound
- TENS / Interferential Current (IFC)
- Cold Laser Therapy (Low-Level Light Therapy)
- Concussion Recovery

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

Patient Name: \_\_\_\_\_

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

Clinical Findings:

Remarks:

Physician's Signature: \_\_\_\_\_

MSP #: \_\_\_\_\_