

## PATIENT REFERRAL FORM (Orthopedic Surgery)

Complete this form and fax along with records, most recent office progress notes, lab work, imaging or any testing pertaining to patient symptoms.

Referring Provider: \_\_\_\_\_

Referring Provider Phone: \_\_\_\_\_

Patient's name: \_\_\_\_\_

Patient's DOB: \_\_\_\_\_

Patient's phone number: \_\_\_\_\_

Reason for referral: \_\_\_\_\_

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For CRMC Medical Group

\_\_\_\_\_  
Date of Appointment

\_\_\_\_\_  
Time

AM / PM

Coffeyville Regional Medical Center offers orthopedic services to maintain and restore active, healthy lifestyles. Offering a spectrum of services from physical therapy to surgery and rehabilitation, our skilled orthopedic team wants to reduce pain and improve mobility.

### **Orthopedic Services Include**

- Knee, Hip and shoulder replacement
- Trauma surgery such as pelvic and acetabular fractures
- Revision hip and knee arthroplasties
- Foot, ankle and hand surgery
- Physical therapy
- Rehabilitation

### **Joint Camp at CRMC**

We understand that a decision to have joint replacement surgery is made with care. Our orthopedic team is there to assist you and your family on your journey towards a better life. We strive to provide excellent care and to exceed your expectations and we want you to achieve a full recovery so you can get back to your life as quickly as possible. This will be accomplished as you and your orthopedic team members (nurses, physician, and therapists) work together.

### **Knee & Hip Pain Assessment**

Free self-assessment are available to determine if therapeutic intervention will help your knee or hip pain at:

[www.crmcinc.org/services/orthopedic-services](http://www.crmcinc.org/services/orthopedic-services)