



2 Pillsbury Street, Suite 404  
Concord, NH 03301  
Phone: (603) 228-STAR (7827)  
Fax: (603) 228- 7828  
www.swingforthestars.com

## Occupational Therapy Doctor's Order

Child's Name: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_

Parent's Name: \_\_\_\_\_  
Phone Number: \_\_\_\_\_

### Services Requested:

Occupational Therapy Evaluation

Occupational Therapy Treatment

### Diagnosis (ICD 10):

- F84.0- Autistic Disorder
- F84.5- Asperger's Syndrome
- F84.8- Other Pervasive Developmental Disorder
- F91.0- Conduct disorder, confined to family
- F91.1- Conduct disorder, childhood onset type
- F91.2- Conduct disorder, adolescent onset type
- F91.3- Oppositional defiant disorder
- F94.8- Other childhood disorder of social function

- F41.1- Generalized Anxiety Disorder
- F90.0- ADHD, inattentive type
- F90.1- ADHD, hyperactive type
- F90.2- ADHD, combined type
- Q90.9- Down's Syndrome
- Q99.2- Fragile X Chromosome
- F94.1- Reactive Attachment Disorder

- F82- Specific dev disorder of motor function
- R27.8- Other lack of coordination
- R41.842- Cognitive deficit, visuospatial deficit
- R41.844- Cognitive deficit- frontal lobe & executive function
- R45.87- Impulsiveness
- R46.0- Low level of personal hygiene
- R62.0- Delayed milestones in childhood
- R63.3- Feeding difficulties
- R63.8- Other sx & signs concerning food & fluid intake

- R20.8- Other disturbances of skin sensation
- R41.840- Attention & concentration deficit
- R43.8- Other disturbance of smell & taste
- R44.8- Other sx & signs involving general sensations & perceptions
- R45.82- Worries
- R46.81- Obsessive compulsive behaviors
- R62.50- Other lack of expected normal physiological development in childhood
- Other: \_\_\_\_\_

I do hereby determine the services listed above to be medically necessary

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

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

Physician's Name Print: \_\_\_\_\_

NPI Number: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_