



Alice Ho Miu Ling Nethersole Social Service Ltd.
Nethersole Outreaching Rehabilitation Mission
Home Based Rehabilitation Service
雅麗氏何妙齡那打素社福有限公司
那打素外展復康事工
家居復康服務

Private Home-Based Rehabilitation Service Referral Form

Tel. : 2689 2419 Fax No. : 2689 3505

Client's Information:

Chinese Name: _____ English Name: _____

HKID No: _____ Sex: _____ Age: _____

Tel: _____ Mobile: _____

Address: _____

Next of Kin: _____ Tel: _____

Medical Information:

Diagnosis: _____

Medical History: _____

Precautions: _____

Service Requested:

<input type="checkbox"/> Physiotherapy	<input type="checkbox"/> Occupational Therapy
<input type="checkbox"/> Exercise Therapy	<input type="checkbox"/> Wheelchair and Aids Prescription Training
<input type="checkbox"/> Mobility and walking Training	<input type="checkbox"/> Home Assessment / Modification
<input type="checkbox"/> Chest Physiotherapy	<input type="checkbox"/> Activities of Daily Living Training
<input type="checkbox"/> Pain management	<input type="checkbox"/> Cognitive Training
<input type="checkbox"/> Carers' training and education	<input type="checkbox"/> Carers' training and education
<input type="checkbox"/> Others: _____	<input type="checkbox"/> Others: _____

Remarks:

Private home based rehabilitation service explained and consent obtained

Professional Fee:

1. Occupational Therapy fee \$1200/visit

2. Physiotherapy fee \$1200/visit

*extra travelling cost at \$200 be charged for a round trip which takes over 30 minutes from our office

From: Dr. / Mr. / Ms _____ Name of Clinic / Organization: _____ Tel: _____

Signature : _____

Date: _____