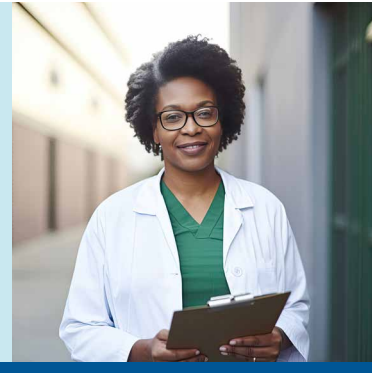


Physical Therapy/Occupational Therapy Referral Checklist for Attending Providers



Use this checklist to identify best practices that will ensure your referral for outpatient physical or occupational therapy optimizes therapy services and worker outcomes.

Messages to convey to the therapist in your referral:

- This referral is to increase the patient's functional ability emphasizing active care and self-reliance.
- Your communications preference for progression or barriers. Further referral depends upon progress and achievement of functional improvement goals. Best practice is to review these via the Physical Medicine Progress Report at Lni.wa.gov/go/F245-453-000.
- Clearly define the reason for the referral: conservative care for musculoskeletal injury, post-surgical rehabilitation, intensive work rehabilitation, etc.
- Define the goals for therapy requiring improvement based on the Activity Prescription Form at Lni.wa.gov/ActivityRx. Choose 3–5 activities the patient needs to progress on to return to work.

Patient information to include in a referral:

- Describe the interventions that have already been used for this episode: Current home exercise program, activity logs, manual therapy interventions, medications/injections.
- Describe the progress and impact the interventions have had to date. Note any positive or negative outcomes from prior interventions:

Flare-up with particular exercises, activity avoidant behaviors, range of motion or strength gains resulting in functional improvement.

- List important comorbidities or complicating factors.
- Indicate current work status (full duty, modified/light duty, not working, no job to return to).

Important documents to attach to a referral:

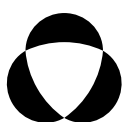
- Activity Prescription Form at Lni.wa.gov/ActivityRx
- Applicable job analysis or job description, if available
- Most recent chart note

Critical data for referrals:

- Worker's information: Name and date of birth.
- Attending provider information: Name and phone/fax numbers.
- Claim information: claim number, date of injury, claim manager's contact information, accepted condition/ICD 10 diagnosis.

When making a referral for outpatient physical or occupational therapy, consider the services available:

Standard Outpatient Therapy at Lni.wa.gov/Therapyresources: These services are provided by occupational therapists and physical therapists for injuries in the first two months or during post-surgical recovery. The clinical focus is on symptom management and home exercise program progression. Typical therapies include supervised exercise, home exercise program creation, manual therapy, and therapeutic modalities.



Work Rehabilitation at [Lmi.wa.gov/patient-care/treating-patients/helping-workers-get-back-to-work/work-rehabilitation-2024](https://lmi.wa.gov/patient-care/treating-patients/helping-workers-get-back-to-work/work-rehabilitation-2024): These services are delivered only by clinics that are enrolled in L&I's Work Rehabilitation program. Typical services are for workers who require additional exertional or durational needs and are achieved by exercise and work simulation tasks. Workers must be capable of participating in full body programs and have no medical contraindications. Goals are based on the job analysis or job descriptions and address limitations on APF activities to enhance return to work. Work rehabilitation is divided into two special programs based on intensity and need.

Work rehabilitation-conditioning is intended for workers who have:

- Sedentary-medium physical job demands.
- Durational exertion needs from one to four hours per day.
- The ability to benefit from care 3–5 times per week based on their individual needs.
- Few psychosocial barriers and low-level fear avoidance, catastrophization, or pain behavior that is manageable within the program.
- Higher-level psychosocial factors or higher claim age may require additional consultation with behavioral health support or activity coaching.

Work rehabilitation-hardening is intended for workers who have:

- Medium-heavy physical job demands.
- Durational exertion in excess of four hours per day.
- The ability to benefit from care 3–5 times per week based on their individual needs.
- Jobs requiring greater task simulation and longer task performance.
- Significant psychosocial barriers, catastrophization, moderate to high-level fear avoidance, or generalized pain behavior that is best managed with an integrated approach.