



Returning to driving is one of the most difficult goals our clients face in their recovery. As therapy practitioners, we play an important role in helping to evaluate, assess, and prepare our clients for a range of driving & community mobility tasks and referrals to a driver rehabilitation specialist.

Your client, _____, has contacted Functional Stability and Mobility to assist them in returning to driving. At this time we have the following scheduled,

- Comprehensive Driving Evaluation
- Modified Driving Training

We are requesting a Physician's order for, Occupational Therapy Comprehensive Driving Evaluation and Training. We will provide you with the results from the clinical assessment and on the road training sessions for your review. If you have any further questions or concerns, please do not hesitate to contact us.

Physician's Signature: _____

Date: _____

Respectfully,

Megan Frazier, MS, OTR, DRS
Owner, Functional Stability and Mobility, LLC
(254) 290-3333 (work)
(609) 354-8883 (cell)
(254) 300-9246 (fax)
www.homeanddriving.com