# IRONSTONE THERAPY, INC. NPI #: 140 791 8394

## PHYSICIAN'S REFERRAL

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### **Information for Physicians**

The following conditions, if present may represent precautions or contraindications to equine assisted activities. Therefore, when completing this form, please note whether these conditions are present, and to what degree.

If you have any questions or concerns, please feel free to contact us at 978.475.4056.

#### **Contraindications:**

**Indwelling Catheter** 

## **Orthopedic:**

Spinal Joint Fusion/Fixation
Spinal Joint Instabilities/Abnormalities
Atlantoaxial Instabilities (incl. Neurological symptoms)
Joint Subluxation/Dislocation
Osteoporosis
Pathological Fractures
Coxas Arthrosis
Heterotopic Ossification/Myositis Ossification
Osteogenesis Imperfecta
Spinal Orthoses
Internal Spinal Stabilization Devices

## **Neurological:**

Hydrocephalus/Shunt Spina Bifida Tethered Cord Chiari II Malformation Hydromyelia Seizure Disorders Multiple Sclerosis

## Medical /Psychological:

Allergies Hemophelia Cardiac Condition