**University of Arizona**

**Speech-Language and Hearing Clinic**

**\*\*Currently accepting OUTPATIENT referrals for new patients.\*\***

**Highlights:**

* **Medicare Part B Provider**
* **Individual and group therapy available**
* **Self-Pay options**
* **Not accepting commercial insurances**
* **Free parking**

**Types of Therapy:**

* **Cognitive-communication evaluation and treatment secondary to TBI, CVA, COVID.**
  + **Memory, attention, concentration & problem solving**
  + **Post-Covid cognitive-communication difficulties**
* **Aphasia evaluation and treatment**
* **Clinical dysphagia evaluation and treatment**

**How to Refer:**

* **Fill out Rx provided (see attached)**

**or**

* **Fax referral and MD Notes to 520.626.1364**
* **Include:**
  + **Patient demographics**
  + **Medical dx code (Parkinson’s, CVA, TBI, etc.)**
  + **SLP diagnosis (Aphasia, Mild Cognitive Impairment, Dysphagia, etc).**

**Questions:**

**Call us: 520.621.7070 or Email us:** [**SLHSClinic@email.arizona.edu**](mailto:SLHSClinic@email.arizona.edu)

**University of Arizona SLHS Outpatient Clinic**

**Speech-Language Pathology Referral form**

**Fax to: UA SLHS OP Clinic**

**Fax Number: 520.621-9901**

|  |  |  |  |
| --- | --- | --- | --- |
| **Patient Name:** |  | **Patient phone:** |  |
| **Patient**  **DOB:** |  | **Patient Insurance:**  **(Check One)** | **Medicare B**  **Self-Pay** |
| **Patient Address:** |  | **Insurance Info:** |  |

**Check at least one medical diagnosis: Check at least one SLP diagnosis:**

**CVA (I63.9) Aphasia**

**TBI (Z87.820) Cognitive-communication impairment**

**Post-Covid condition (Z86.6) (R41.841)**

**Parkinson’s Disease (G20) Dysarthria**

**Mild Cognitive Impairment (G31.84) Dysphagia**

**Other: Other:**

**Please fax latest MD notes and imaging reports, if applicable, along with this referral**