



*MAGNOLIA MEDICAL  
GROUP, INC.*

(864) 346-0391

☐ **Adult**

☐ **Pediatric**

**Please fax all prescriptions and patient demographics to (878) 840-2112**

Patient Name: \_\_\_\_\_

Diagnosis: \_\_\_\_\_

☐ **Physical Therapy** - Evaluate & Treat

☐ **Occupational Therapy** - Evaluate & Treat

☐ **Speech Therapy** - Evaluate & Treat

Additional Instructions: \_\_\_\_\_

Physician Signature: \_\_\_\_\_ Date: \_\_\_\_\_

☐ **Grace Rehabilitation Center**

401 Guess Street, Greenville

☐ **Laurens Rehabilitation Center**

106 Parkview Dr., Laurens

☐ **Mauldin Rehabilitation Center**

213 East Butler Rd. , Ste E-2, Mauldin

☐ **Towers Physical Therapy**

415 N Main ST., Greenville