



LODI PHYSICAL THERAPY 631 SOUTH HAM LANE LODI CA, 95242
PHONE (209) 368-7433 FAX (209) 368-4219
www.Lodipt.com

AUTHORIZATION REQUEST

DATE: 10/7/8

TO ADJUSTER: <i>McKenzie Dawson</i>	RE: <i>Tiffany Anderson</i>
PHONE: <i>9165631900 ext 242</i>	FAX: <i>9165631919</i>
INSURANCE:	Date of Injury: <i>6/19/8</i>
DATE OF RX: <i>10/7/8</i>	CLAIM #:
DIAGNOSIS:	Referring Physician: <i>Dr. G. Murata</i>
Number of visits requesting: <i>2x4 8 visits</i>	

Urgent For your review Reply ASAP Please Comment

Please sign and return if authorizing any Physical Therapy visits. If you have any questions or need additional information please feel free to call (209) 368-7433.
Thank you for your time.

Authorization #: _____
Number of Visits Auth: _____
Authorized By: _____

NUMBER OF PAGES _____

Sincerely,