NatureTalks LLC
Nature-based•Bilingual•Virtual
Speech & Language Services
Alisyn Kandybowicz M.S. CCC-SLP
NPI# 1417724956

SPEECH THERAPY PRESCRIPTION & REFERRAL FORM

Patient's Name: _____ Date of Birth: _____
Contact Name: _____ Phone No.: _____

Commonly Used ICD-10 Codes (Check all that apply)

☐	F80.0 – Phonological processing disorder / Articulation disorder
☐	F80.1 – Expressive language disorder
☐	F80.2 – Mixed receptive-expressive language disorder
☐	F80.4 – Speech and language developmental delay due to hearing loss
☐	F80.89 – Other developmental disorders of speech and language
☐	Q90.9 – Down Syndrome, unspecified
☐	R13.10 – Dysphagia, unspecified
☐	R41.841 – Cognitive communication deficit
☐	R48.2 – Apraxia
☐	R48.8 – Other symbolic dysfunction (secondary to a neurological condition)
☐	R49.9 – Unspecified voice and resonance disorder
☐	R63.3– Feeding difficulties

Conditions Commonly Associated with Treatment of Pediatric Patients

☐	F80.81 – Childhood onset fluency disorder (Stuttering/Cluttering)
☐	F84.0 – Autistic disorder
☐	R62.0 – Delayed milestone in childhood
☐	R62.5 – Other and unspecified lack of normal physiological development in childhood

Conditions Commonly Associated with Treatment of Adult Patients

☐	I69.91 – Cognitive deficits following unspecified cerebrovascular disease
☐	I69.920 – Aphasia following unspecified cerebrovascular disease
☐	R47.1 – Dysarthria and anarthria

Other: (please list any specific ICD-10 Code and description)

_____

Speech-Language Pathology Service(s)

☐ Evaluation / Treatment Evaluation Only ☐

Physician's Signature: _____ Date: _____
Physician's Printed Name: _____ NPI#: _____

When signed by a physician, this form acts as a prescription for therapy services. Please fax to the number below along with any additional relevant medical information.

Professional, accessible and nature-based therapeutic services.

www.naturetalksllc.com • info@naturetalksllc.com
Phoenix, AZ 85083 • Tel 602.284.5406 • Fax 602.297.6516