

Outpatient Pulmonary Rehabilitation

Done at Flower Hospital

Phone 419/824-1548

Fax 419/882-7840

Please fax the following perts:

Order signed or stamped by MD

History and Physical with correspondence

Pulmonary Function Test results (have to have been done in the last 6 months- if not, need to send additional order for PFTs)

Demographics along with insurance information