**To refer to our office please do one of the following:**

1. Fax records with referral form to 616-920-6533 with the included information
* Patient name
* Date of Birth
* Patient address and phone number
* Referring provider’s name
* Which office the patient would prefer (Holland or Grandville)
* Reason for referral / diagnosis
1. Send referral through EPIC

Holland Office Department: AP FYZICAL PT HLD 3100 [5110000007]

Grandville Office Department: AP FYZICAL PT GDVL 3501 [5110000008]

Thank you for referring to us,

**Michigan Fyzical Therapy and Balance Centers**