#### MOUNT VERNON REHABILITATION AND MEDICINE ASSOCIATES

2501 Parkers Lane, Alexandria, VA 22306 (703) 664-7285 FAX (703) 664-7568
19440 Golf Vista Plaza, Ste 210, Leesburg, VA 20176 (703) 729-0141 FAX (703) 729-0143
3299 Woodburn Rd, Ste 380, Annandale, VA 22003 (703) 828-9330 FAX (703) 828-3992
Ali G. Ganjei, MD, Sea Hun Kim, MD, Kevin F. Fitzpatrick, MD, Peter L. Wei, MD
Carlos R. Perez Gonzalez, MD, Samantha A. Benjamin, DO, MBA, Michael S. Chung, MD
John A. Stratton, MD

# We are Physiatrists!

Physiatrists, better known as rehabilitation physicians, are nerve, and bone experts who treat injuries or illnesses that affect how you move.

Rehabilitation physicians are medical doctors who have completed training in the medical specialty of physical medicine and rehabilitation (PM&R). Specifically, rehabilitation physicians.

- Diagnose and treat pain
- Restore maximum function lost through injury, illness or disabling conditions
- Treat the whole person, not just the problem area
- Lead a team of medical professionals
- Provide non-surgical treatments
- Explain your medical problems and treatment/prevention plan

The job of a rehabilitation physician is to treat any disability resulting from disease or injury, from sore shoulders to spinal cord injuries. The focus is on the development of a comprehensive program for putting the pieces of a person's life back together after injury or disease-without surgery.

Rehabilitation physicians take the time needed to accurately pinpoint the source of an ailment. They then design a treatment plan that can be carried out by the patients themselves or with the help of the rehabilitation physician's medical team. This medical team might include other physicians and health professionals, such as neurologist, orthopedic surgeons, and physical therapists. By providing an appropriate treatment plan, rehabilitation physicians help patients stay as active as possible at any age. Their broad medical expertise allows them to treat disabling conditions throughout a person's lifetime.

#### We provide services for patients with:

- Musculoskeletal/Spine problems
- Brain injury Trauma
- Spinal Cord Injury
- Neurological Disorders
- Amputation Rehabilitation
- Stroke Rehabilitation/Inpatient Rehab
- Orthopedic Trauma
- Work Related and Sports Injuries (Concussions)
- General Medical Rehabilitation
- EMG & Nerve Conduction Studies
- Injectable Medicine for Spasticity (Botox or Xeomin)
- Neurotoxin injections for Migraine Headaches
- Telemedicine Services
- Independent Medical Evaluations (IME)

### **Mount Vernon Rehabilitation Medicine Associates**

**EMG Patient Registration Form** 

#### **Demographic Information**

Last Name:	st Name: First Name:			MI:	
Date of Birth:	Soc Sec No:		Gendo	Gender: □Male □Female	
Height:	Weight:	Domir	nant Hand: 🗆 Left	□Right	
Home Address:		City:	State:_	ZIP:_	
Home Phone:	ne: Mobile Phone:				
Email Address:					
Emergency Contact Per					
formation about Physicians					
Name of Doctor who Re		est:			
Name of your Primary (					
List any other doctors v					
edications and Allergies	u are allergic to: u are taking (please inde vitamins and supp	nclude dose and for hope			
edications and Allergies  List all Medications you  List all Medications you  (Please be sure to inclu	u are allergic to: u are taking (please inde vitamins and supp	nclude dose and for hope			
edications and Allergies  List all Medications you  List all Medications you  (Please be sure to inclu	u are allergic to: u are taking (please inde vitamins and supp	nclude dose and for hope			
edications and Allergies  List all Medications you  List all Medications you  (Please be sure to inclu	u are allergic to: u are taking (please inde vitamins and supp	nclude dose and for hope			
edications and Allergies  List all Medications you  List all Medications you  (Please be sure to inclu	u are allergic to: u are taking (please inde vitamins and supp	nclude dose and for hope			
edications and Allergies  List all Medications you  List all Medications you  (Please be sure to inclu	u are allergic to: u are taking (please inde vitamins and supp	nclude dose and for hope			
edications and Allergies  List all Medications you  List all Medications you  (Please be sure to inclu	u are allergic to: u are taking (please inde vitamins and supp	nclude dose and for hope			
edications and Allergies  List all Medications you  List all Medications you  (Please be sure to inclu	u are allergic to: u are taking (please inde vitamins and supp	nclude dose and for hope			
edications and Allergies  List all Medications you  List all Medications you  (Please be sure to inclu	u are allergic to: u are taking (please inde vitamins and supp	nclude dose and for hope			

## **Mount Vernon Rehabilitation Medicine Associates**

Please describe your symptoms and/or the reason you are having this test:					
	<del></del>				
For how long have you had this problem?					
If this problem began after an injury, please describe	e the injury:				
If have had prior EMG(s), please list the approximate performed the test(s):	e date(s) and the name(s) of the doctor(s) who				
List your current and prior medical conditions:	List your prior surgeries and approximate dates:				

### **Mount Vernon Rehabilitation Medicine Associates**

Smoking Status:  Never Smoked Former Smoker Current Every Day Smoker Current Heavy Smoker Unknown if Ever Smoked Smoker, Current Status Unknown Current Some Day Smoker Current Light Smoker	<b>,</b>	Problematic Drug Use: □ Never □ Prior □ Current
Employment Status:  □ Employed □ Student □ Retired □ Ho  Occupation:	omemaker 🗆 Unemploy	
Ethnicity/Race:  American Indian or Alaska Nate   Hispanic or Latino Asian Black or African American Native Hawaiian or Pacific Islae   White Decline to Answer	tive	nish
s there anything else you would like us to kn	now?	
ensent regarding payment/insurance:  nerby authorize Mount Vernon Rehabilitation Medicine ertify that the information I have reported with regard formation necessary to secure payment of benefits to	d to my insurance coverage is	correct. I further authorize the release of all