

3851FM 663 – Midlothian, TX. 76065 Phone: 469-550-9913

Fax: 469-461-0765 (or) Fax: 214-817-8019

Welcome to Texas Speech Pathways,

We are excited to provide knowledgeable and experienced speech language therapy services to assist each client with better communication skills. Please take a moment to review and complete the attached intake forms. Also, a copy of the following is needed in order to complete the intake forms:

- 1) Copy of Driver's License
- 2) Copy of Insurance Card

Note: If you will be considered **private pay**, please contact the office for further details.

Thank you, Texas Speech Pathways Staff



NEW PATINT INTAKE INFORMATION

If you are seeking speech services for yourself or a family member, please fill out this form. We will verify your insurance benefits and get back to you as soon as possible to schedule a speech evaluation.

Please fill out entire form. All information is necessary to verify your insurance benefits and scheduling your appointment.

Identifying and Family Information:					
Patient Name:	DOB:	Sex:	M	1	F
Address:	City:		Zip:		
Cell Phone:	Email:				
<u>Insurance</u>					
What is your primary Medical Insurance?					
ID#:	Group#				
Do you have secondary insurance?	yes No				
If yes, what insurance?	_ID#	Group#			
Primary Physician's Name:	Phone:		Fax:		
When was last Well Check-up/doctor visit?					
What is your dominant language?					_
Is there a language other than English spok	en in the home?	Yes	No		
If yes, which one?					
	SPEECH-LANGUAGE-HEA	RING			
Please explain your concerns for patient's speech					
Do you feel patient has a hearing problem?		Yes	No		
If yes, please describe.					
Has patient ever had a hearing evaluation/s	creening?	Yes	No		