Date_____

Dear Dr._____:

I would like to receive chiropractic treatment and physical therapy treatment from Tom Hyland Robertson, DC, at Whole Chiropractic Healthcare, LLC, in Odenton.

Please refer me for at least 10 visits so Dr. Robertson can get a good idea of how I will progress with his treatments over the next few weeks. Please include the words “Chiropractic” and “Physical Therapy” on the referral and fax to: **480.393.5959**.

Thank you for your help—Dr. Robertson told me keeping you up to date with my progress is part of his treatment plan. If you need to speak with him directly, please call 410.305.1331 (office) or 410.294.9551 (cell) with any concerns or questions.

Once again, thanks for helping me get the care that I need
Yours truly,

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Dr. Robertson’s Address: Whole Chiropractic Healthcare, LLC
1202 Annapolis Rd., Suite I (2nd Fl.)
Odenton, MD 21113