Center for Integrative Health, LLC
Nancy H. O'Hara, MD & Gail M. Szakacs, MD
3 Hollyhock Lane Wilton, CT 06897
Tel: 203-834-2813 Fax: 203-834-2831

PATIENT NAME:_____DATE: _____

LIST OF CURRENT THERAPIES / INTERVENTIONS

(You may also provide this information in a typed Word document or similar format)

Name of Therapy	Hours/ week	Date Started	Location/ Practitioner
(Example) ABA	6 hours/ day 5 days/ week	1/1/15	Autism Center, Dr. Smith
(Example) Music therapy	1 hour/ week	9/23/14	Bruce Springsteen