(name) is a patient in our office and is being
treated for a specific spinal condition which requires he/she/they
be at the doctor's office on a frequency oftimes a
week. The care is essential for the patient's ability to function and
to ensure that his/her/their condition does not further
deteriorate and cause increased symptomology and or disability.

## Dr Dean DePice

	Educational Services	Elementary and Secondary Schools		No	Except for essential employees in the preparation and distribution of meals f		
		Junior Colleges		No			
		Colleges, Universities, and Professional Schools		No	Except for staff to support residence halls where students must remain		
		Business Schools and Computer and Management Training		No			
		Technical and Trade Schools		No			
		Other Schools and Instruction		No			
		Education Support Services		No			
	Health Care and Social Assistance	Ambulatory Health Care Services	Offices of Physicians	Yes	Elective procedures prohibited		
5			Offices of Dentists	Yes	Elective procedures prohibited		
			Offices of Other Health Practitioners	Yes	Elective procedures prohibited		
			Outpatient Care Centers	Yes	Elective procedures prohibited		
1			Medical and Diagnostic Laboratories	Yes	Elective procedures prohibited		
			Home Health Care Services	Yes	Elective procedures prohibited		
			Other Ambulatory Health Care Services	Yes	Elective procedures prohibited		
		Hospitals	General Medical and Surgical Hospitals	Yes	Elective procedures prohibited	46	
			Psychiatric and Substance Abuse Hospitals	Yes	Elective procedures prohibited	7.5	
			Specialty (except Psychiatric and Substance Abuse) Hospitals	Yes	Elective procedures prohibited		
		Nursing and Residential Care Facilities	Nursing Care Facilities	Yes			
			Residential Mental Retardation, Mental Health and Substance Abuse Facilities	Yes			
			Community Care Facilities for the Elderly	Yes		+	
			Other Residential Care Facilities	Yes			
		Social A <mark>ssista</mark> nce	Individual and Family Services	Yes			
			Community Food and Housing, and Emergency and Other Relief	Yes			
			Services	res			
			Vocational Rehabilitation Services	Yes		_	
			Child Day Care Services	No	Except where permitted by waiver		

