



**GREAT LAKES
CHIROPRACTIC**

601 E. Chicago Rd.
Coldwater, MI 49036

Ph. 517-278-7246
Fax: 517-279-2858

Dr. Sean P. Groves
Chiropractic Physician
Chiropractic Sports Physician
Chiropractic Orthopedist

Dr. Kavita Jain
Chiropractic Physician
Chiropractic Sports Physician

Dr. Beau Doubleday
Chiropractic Physician

Dr. Jeff Koepfler
Chiropractic Physician

Darcie Musielewicz
Spinal Rehab Center
Masters in Athletic Training

Mandy Carpenter
Certified Massage Therapist

=====**The most advanced Chiropractic Facility in the Area**=====

Worker's Compensation Authorization Form

Patient Name _____ DOB _____

Address _____

Employer _____

Authorized by _____ Phone _____

Claim #/SSN _____ Date of Injury _____

The above patient has come to our office for medical treatment. Please email or fax your authorization for Chiropractic Treatment to our office:

Fax: 517-279-2858

Email: glchiro@chartermi.net

Employer Signature _____ Date _____

Work Comp Carrier Information: _____

Signature of Authorized Representative

date

Claim Status phone number

Services may include and are not limited to the following:

Spinal Manipulation	98940/1
Traction	97120
Radiographs	
Massage Therapy	97124
Spinal Rehabilitation	97110