

## PHYSICIAN FAX REFERRAL REQUEST/ORDER

PLEASE FAX THIS REFERRAL TO  
APPOINTMENT SCHEDULING AT **225.768.2186**

10101 Park Rowe Avenue  
Baton Rouge, LA 70810  
Phone: 225.769.2200  
TheNeuroMedicalCenter.com

### PATIENT INFORMATION

(Please Print)

Patient's Name \_\_\_\_\_ D.O.B. \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Home Phone (\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_\_ Work Phone (\_\_\_\_) \_\_\_\_\_  
 Diagnosis \_\_\_\_\_ Diagnosis Code \_\_\_\_\_  
 Insurance Name \_\_\_\_\_ Member # \_\_\_\_\_ Group # \_\_\_\_\_  
 \*\*\*\*\*Please attach a copy of the insurance card if possible.\*\*\*\*\*

### REFERRING PHYSICIAN INFORMATION

MD Name (print) \_\_\_\_\_ Date \_\_\_\_\_  
 Signature of Referring Physician \_\_\_\_\_ Nurse/Contact \_\_\_\_\_  
 Phone (\_\_\_\_) \_\_\_\_\_ FAX (\_\_\_\_) \_\_\_\_\_ Physician's Secure E-mail \_\_\_\_\_

### SERVICES REQUESTED

#### NEUROSURGERY 3<sup>RD</sup> & 4<sup>TH</sup> FLOORS

- Charles R. Bowie, M.D.** (Adults)
  - Baton Rouge
  - Eunice
  - Hammond
- Luke A. Corsten, M.D.** (Adults)
  - Baton Rouge
- Gregory L. Fautheree, M.D.** (Adults)
  - Baton Rouge
  - Gonzales
  - St. Francisville
- Allen S. Joseph, M.D.** (Children)
  - Baton Rouge
- Horace L. Mitchell, M.D.** (Adults)
  - Baton Rouge
- Eric K. Oberlander, M.D.** (Adults)
  - Baton Rouge
  - Covington
  - Hammond
- Kelly J. Scrantz, M.D.** (Adults)
  - Baton Rouge
- Scott W. Soleau, M.D.** (Adults)
  - Baton Rouge
- Richard A. Stanger, M.D.** (Adults)
  - Baton Rouge
  - Walker
  - Zachary
- Paul J. Waguespack, M.D.** (Adults)
  - Baton Rouge
- First Available**

#### NEUROLOGY 4<sup>TH</sup> FLOOR

- Gerald J. Caegan, M.D.**
- April A. Erwin, M.D.**
- Dariusz W. Gawronski, M.D.**
- B. Glenn Kidder, M.D.**
- Jon D. Olson, M.D.**
- Kuldeep V. Patel, M.D.**
- Rebecca E. Whiddon, M.D.**
- First Available**

#### PHYSICAL MEDICINE & REHABILITATION (PM&R)/ PAIN MEDICINE- 3<sup>RD</sup> FLOOR

- William J. Graunard, M.D.**
  - Baton Rouge
  - Zachary
- Martin A. Langston, M.D.**
- John E. Nyboer, M.D.**
- Scott D. Nyboer, M.D.**
- Samir K. Patel, M.D.**
  - Baton Rouge
  - Gonzales
  - Walker
- Jyoti S. Pham, M.D.**
- Jake Trahan, III., M.D.**
  - Baton Rouge
  - Crowley
- First Available**

#### NEUROPSYCHOLOGY 4<sup>TH</sup> FLOOR

- Jessica L. Brown, Ph.D., M.P.**
- Darla M.R. Burnett, Ph.D., M.P.**
- Brooke B. Cole, Ph.D., M.P.**
- Paul M. Dammers, Ph.D., M.P.**
- First Available**

#### DIAGNOSTIC SERVICES 4<sup>TH</sup> FLOOR

- EEG
- EEG – 24 Hour Ambulatory
- Carotid Ultrasound
- Transcranial Doppler
- EMG\*
- Nerve Conduction\*
- BAER
- VER
- SSEP/PT
- SSEP/MN

*\*Please provide specifics in Comments section*

#### IV HYDRATION & VITAMIN INFUSION THERAPY 4<sup>TH</sup> FLOOR

#### IMAGING SERVICES 1<sup>ST</sup> FLOOR

(Please send previous records)

- MRI\*
- MRA\*
- X-Ray\*

#### OUTPATIENT THERAPY CENTER

15420 S. Harrell's Ferry Rd.  
Baton Rouge, LA 70816  
Phone: (225) 751-9797  
Fax: (225) 751-1097

- Physical Therapy**
- Occupational Therapy**
- Hand Therapy**
- McKenzie Spine Program**
- Dry Needling**
- Kinesio Taping**
- TENS unit**

#### DURABLE MEDICAL EQUIPMENT

*Custom & Pre-Fabricated:*

- Back Brace**
- Carpal Tunnel Splint**
- Elbow/Cubital Tunnel Splint**
- Finger Splint**

Insurance Authorization # \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Comments \_\_\_\_\_

MRI \_\_\_\_\_ MRA \_\_\_\_\_

X-Ray \_\_\_\_\_ EMG/NCV \_\_\_\_\_

#### FOR THE NEUROMEDICAL CENTER CLINIC TO COMPLETE

Your patient is scheduled as follows:

Doctor/Test \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_ Location \_\_\_\_\_