

THE PHYSICIANS

Comprehensive Spine Care and Pain Management

Please fax this referral to:

SANDY SPRINGS
TEL 404 816 3000
FAX 678 904 5797

MARIETTA
TELL 770 419 9902
FAX 770 419 7457

ROME/ CALHOUN
TEL 706 314 1900
FAX 706 314 1901

DATE _____

PATIENT NAME _____

PHONE _____

EMAIL _____

DATE OF BIRTH _____

SOCIAL SECURITY NO. _____

INSURANCE _____

DIAGNOSIS _____

REFERRAL FOR Consultation & Treatment
 Procedure

PLEASE ATTACH IF AVAILABLE Most recent diagnostic reports (MRI, EMG, etc.)
 Most recent office notes
 Copy of insurance card
 Copy of patient demographic information

APPOINTMENT CONFIRMATION Appointment date
 Appointment time

PHYSICIAN PREFERENCE	SANDY SPRINGS	MARIETTA	ROME	CALHOUN	
<input type="checkbox"/>	ZACKARY E. BOOMSAAD, M.D.	<input type="checkbox"/>	PAUL L. MEFFERD, D.O.	<input type="checkbox"/>	VICTOR A. CHIN, M.D.
<input type="checkbox"/>	CHARLES A. MACNEILL, M.D.	<input type="checkbox"/>	JOHN G. PORTER, M.D.	<input type="checkbox"/>	MICHAEL SCHURDELL, M.D.
<input type="checkbox"/>	KEITH C. RAZIANO, M.D.			<input type="checkbox"/>	PAUL L. MEFFERD, D.O.
<input type="checkbox"/>	RANDY F. RIZOR, M.D.				
<input type="checkbox"/>	DARRELL N. SIMONE, M.D.				

FORM COMPLETED BY _____

REFERRING OFFICE _____

PHONE _____ FAX _____

Thank you for choosing our practice.

WWW.THEPHYSICIANS.COM

THE PHYSICIANS

Comprehensive Spine Care and Pain Management

In order to better serve you, please be advised of the following instructions.

FIRST VISIT

- Please arrive 30 minutes ahead of your scheduled appointment. This allows us time to review your completed forms, make copies of insurance information and take care of any other administrative details.
 - Please remember to bring your most current insurance card(s) and a photo I.D., as well as a list of any medications you are currently taking.
 - Payment is expected at the time of service. This applies to all co-payments, co-insurance and/or deductibles based on your insurance plan.
 - If you are unable to keep your appointment, please reschedule at least 24 hours in advance.
 - If you have any other questions or concerns, please feel free to contact our office directly.
-

OFFICE LOCATIONS

SANDY SPRINGS
5730 Glenridge Drive, Suite 100
Sandy Springs, Georgia 30328
Tel 404 816 3000
Fax 678 904 5797

ROME
18 Riverbend Drive, Suite 100
Rome, Georgia 30161
Tel 706 314 1900
Fax 706 314 1901

MARIETTA
790 Church Street, Suite 550
Marietta, Georgia 30060
Tel 770 419 9902
Fax 770 419 7457

CALHOUN
150 Warrior Path NE, Suite 2
Calhoun, GA 30701
Tel 706 314 1900
Fax 706 314 1901

DID YOU KNOW?

Formed in 1995, The Physicians' was the first pain medicine practice in the city of Atlanta. Our doctors were the first to be boarded in Pain Medicine by the American Board of Anesthesiology and our newer doctors continue that tradition of training and excellence. The Physicians' has been associated with major teaching institutions and hospitals in the greater Metro-Atlanta area since its inception. Our doctors are maximally trained in interventional procedures for the spine and peripheral nervous and musculoskeletal systems; we specialize in appropriate pain medication management and emphasize functional gain to improve quality of life.

We look forward to seeing you.

WWW.THEPHYSICIANS.COM