Patient Referral Form

DOB

Patient Name

Phone (Home) (Work)

Insurance Company

Insured Person

Authorization No.

Authorized By

Referring Doctor

Address

Phone

Reason for Referral

Services Ordered:

- ❑ Exam Only
- ❑ Testing Only
- ❑ Exam and Testing
- ❑ Testing and Interpretation

Ancillary Tests (if applicable):

- ❑ OCT (Optical Coherence Tomography): RNFL
- ❑ OCT: Macular Scan
- ❑ Visual Field: 24-2
- ❑ Visual Field: Bleph
- ❑ Visual Field: Matrix
- ❑ Other

Diagnosis:

37430 Ptosis	37487 Dermatochalasis	2273 Pituitary Tumor(s)
V5869 Possible Drug Toxicity	3482 Pseudotumor Cerebri	36990 Unexplained Vision Loss

Other

If Other, Include ICD-9 Shepherd Eye Center ___ ___ ___ ___ ___

Please bring this form with you to your appointment

Shepherd Eye Center
Since 1968

702.731.2088 See Smarter 800.551.1626

www.shepherdeye.com

Patient Referral Form

Our doctors are providers for most insurance companies.

Brian D. Alder, M.D.
Carolyn A. Cruvant, M.D.
Dan L. Eisenberg, M.D.
Emily L. Fant, M.D.
Steven O. Hansen, M.D., F.A.C.S.
Kevin N. Miller, M.D.
Steven N. Montgomery, M.D., F.A.C.S.
Francis G. Noll, M.D.
Ravi K. Reddy, M.D., F.A.C.S.
Tushina A. Reddy, M.D.
Adam J. Rovit, M.D., F.A.C.S.
Robert B. Taylor III, M.D., F.A.C.S.
Raymond B. Theodosis, M.D.

Your Appointment

Date/Time: With Dr.

Location:

❑ **Henderson Office**
2475 W Horizon Ridge
Henderson, NV 89052
702.731.2088
702.685.0934 Fax

❑ **Las Vegas Office**
3575 Pecos-McLeod
Las Vegas, NV 89121
702.731.2088
702.734.7836 Fax

❑ **Southwest Office**
9100 W Post Rd
Las Vegas, NV 89148
702.731.2088
702.982.5714 Fax

❑ **Summerlin Office**
2100 N Rampart Blvd
Las Vegas, NV 89128
702.731.2088
702.228.3988 Fax

Appointment Reminders

- Plan on being in our office 2 hours
- Your eyes may be dilated
- Bring a list of all medications
- Bring all insurance cards (Medicare card)
- Bring glasses, contact lenses and contact case

I, authorize my records to be released from

my referring doctor to this referring doctor regarding my care.

Signature Date

Exam Results: ❑ Phone ❑ Letter ❑ Fax

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