



Please fax this Referral Form to the preferred clinic at the number listed below

**TRI-CITIES/NE TENNESSEE**

- Bristol: 833-450-5986
- Johnson City: 833-450-6025
- Kingsport: 833-450-6395

**CHATTANOOGA/SE TENNESSEE**

- Chattanooga: 833-450-5911
- Cleveland: 833-450-6211
- Ooltewah: 833-450-6311

**PROCEDURES** (Please note not all procedures are available at each location; we will direct to the appropriate clinic as necessary)

- Kyphoplasty
- Epidural Steroid Injection
- Interlaminar
  - Cervical  Lumbar
- Transforaminal
  - Cervical  Lumbar
  - Left  Right
- Medial Nerve Branch Block
  - Cervical  Lumbar
  - Left  Right

- Lumbar Puncture
- Blood Patch
- SI Pain/SI Fusion
- Lumbar Stenosis/Vertiflex
- Pain Evaluation & Treatment

(Briefly state concern)

- Spasticity Treatment (Botox)
- Headache Evaluation
- Botox Trial
- Pain Psychology Evaluation & Treatment
- Osteoporosis Evaluation
- Neuromodulation Trial

Please complete the information below or attach a copy of the patient's demographics. Include pertinent clinic notes and imaging records with a legible copy of all insurance cards.

**PATIENT INFORMATION**

First Name \_\_\_\_\_ Middle Name \_\_\_\_\_ Last Name \_\_\_\_\_  
DOB \_\_\_\_\_ Gender:  M  F Social Security Number \_\_\_\_\_ Patient Phone \_\_\_\_\_  
Patient Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

**PRIMARY INSURANCE PLAN**

Payer \_\_\_\_\_ Plan \_\_\_\_\_ Policy # \_\_\_\_\_ Group # \_\_\_\_\_  
Policyholder Name \_\_\_\_\_ Policyholder Social Security Number \_\_\_\_\_  
Relationship to Patient \_\_\_\_\_ Policy Holder's DOB \_\_\_\_\_

**REFERRING OFFICE**

Name of Provider \_\_\_\_\_ Name of Referring Coordinator \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_ Provider NPI \_\_\_\_\_

We accept many major medical insurance plans. We will contact the patient to schedule an appointment.  
Additional referral forms can be downloaded at [spinepainassociates.com/referrals](http://spinepainassociates.com/referrals).