DESERT SPINE and Sports Physicians

Brad Sorosky, MD
Susan Sorosky, MD
Tima Le, DO
Arthur Hatch, DO

Please **FAX** this form to: (602) 957-1570

To **schedule**, call: (602) 840-0681

3700 N. 24th St., Suite 210, Phoenix, AZ 85016
6636 E. Baseline Rd., Suite 100, Mesa, AZ 85206

www.desertspineandsports.com

Desert Spine and Sports Physicians **Consultation Request Form**

Patient's Name: _____ **DOB:** _____ **Home phone:** _____

Cell phone: _____

Primary Insurance: _____ Secondary Insurance (if applicable): _____

Reason for consultation: _____

_____

_____

PLEASE INCLUDE: REFERRAL/AUTHORIZATION, COPY OF INSURANCE CARD, CHART NOTES, RADIOLOGY REPORT(S)

Rx Consultation

Schedule exam with: ○ Dr. B. Sorosky ○ Dr. S. Sorosky ○ Dr. T. Le ○ Dr. A Hatch ○ First Available

Evaluate and treat: _____ Low Back _____ Neck _____ Leg _____ Arm

_____ Knee _____ Shoulder _____ Hip _____ Other

Rx Consultation with EMG/NCV

Reason for test: _____ Leg pain _____ Arm pain _____ Numbness/tingling _____ Weakness

Evaluate for: _____ Carpal tunnel syndrome _____ Ulnar neuropathy _____ Lumbar radiculopathy

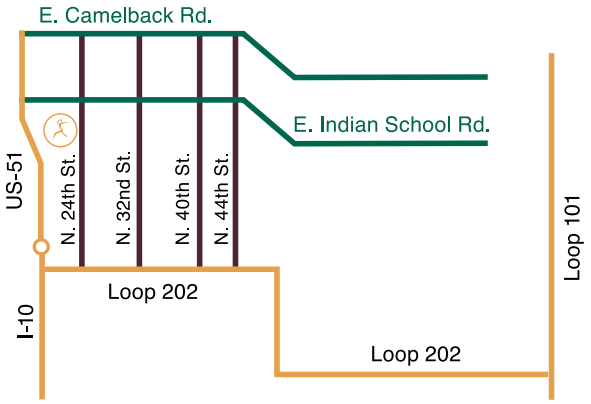
_____ Cervical radiculopathy _____ Brachial plexopathy

_____ Lumbosacral plexopathy _____ Peripheral neuropathy

Physician's name (printed): _____ Physician's Signature: _____

Phone: _____ Date: _____

Phoenix/Biltmore Clinic: 3700 N. 24th St., Suite 210
Phoenix, AZ 85016



East Valley Clinic: 6636 E. Baseline Rd., Suite 101
Mesa, AZ 85206