

Referral Form Pulmonary Critical Care

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**PLEASE FAX REFERRAL FORM, PATIENT DEMOGRAPHICS
AND INSURANCE CARD(S) TO 505.727.3171**

Patient name: _____ DOB: _____

Home phone: _____ Cell phone: _____

Insurance: _____

Referring provider office name: _____ Referring provider office phone: _____

Primary care provider name (if different than referring): _____ PCP office phone: _____

Reason for referral/request for consultation/order (check all that apply):

- | | | |
|---|--|--|
| <input type="checkbox"/> Asthma | <input type="checkbox"/> Lung cancer screening | <input type="checkbox"/> Respiratory distress |
| <input type="checkbox"/> BiPAP or CPAP patient | <input type="checkbox"/> Lung mass/nodule | <input type="checkbox"/> Restrictive lung disorder (scoliosis) |
| <input type="checkbox"/> Bronchopulmonary dysplasia | <input type="checkbox"/> Neuromuscular disorders | <input type="checkbox"/> Second opinion |
| <input type="checkbox"/> Central apnea | <input type="checkbox"/> Obstructive sleep apnea | <input type="checkbox"/> Sleep evaluation |
| <input type="checkbox"/> Chronic cough | <input type="checkbox"/> PFT | <input type="checkbox"/> Tracheostomy and/or ventilator patients |
| <input type="checkbox"/> Chronic lung disease | <input type="checkbox"/> Pulmonary hypertension | <input type="checkbox"/> Wheezing |
| <input type="checkbox"/> Cystic fibrosis | <input type="checkbox"/> Recurrent or persistent pneumonia | <input type="checkbox"/> Special/other _____ |

Evaluations that **may have** already been completed:

When

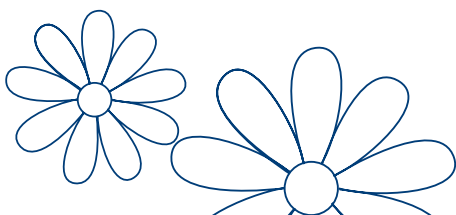
Where

Please include relevant discs or films of previous chest x-rays.

Provider signature: _____

- I would like copies of all documentation associated with this service.
- Please DO NOT copy my office on this service documentation, only provide a courtesy phone call regarding diagnosis.

We accept most major insurance plans, including Blue Cross and Blue Shield of New Mexico, TRICARE, Medicare, all Centennial/Medicaid plans, including Presbyterian Centennial Care, New Mexico Health Connections, True Health New Mexico, United Healthcare, Western Sky Community Care and United Retiree Health Care Authority and many others.



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