



BIRMINGHAM OFFICE:

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Birmingham, AL 35205
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JASPER OFFICE:

20 Medical Center Dr. Ste 200
Jasper, Al 35501
Ph:205.544.2195 **Fax: 844.206.1763**

Name: _____

D.O.B. _____ S.S. #: _____

Address: _____

Phone: _____

Insurance: _____ Contract #: _____ Grp: _____

Worker's Compensation Information

Insurance Company: _____ DOI: _____

Claim #: _____ Adjuster/Case Mgr. Name: _____

Phone: _____ Fax: _____

Reason for Referral

General Pain Management Evaluate (consult only)

Evaluate and Treat Spinal Cord Stim Eval Procedure Only Procedure and Treat

Procedures: (please circle all that apply or write in any procedure not listed)

Epidural (LESI, CESI, TESI, TFESI, or Caudal) Discogram SIJ Injection RFL
Spinal Cord Stim Trial Sympathetic Block Stellate Ganglion Facet Trigger Point
Selective Nerve Root Injections IDET/Biacuplasty Vertebroplasty/Kyphoplasty

Other/Comments: _____

Referring Physician Name: _____

NPI: _____ Contact: _____

Phone: _____ Fax: _____

Please note all VIVA Medicare, Healthsprings, or BCBS BEG policies will require prior authorization