



MAIN LOCATIONS

850 Olive Street, Suite A, Shreveport, LA 71104
10600 Industrial Drive, Minden, LA 71055
211 Medical Drive, Natchitoches, LA 71457
2106 Loop Rd Ste B, Winnsboro LA 71295

Please fax Referral Packet to (805) 295-4715 or give us a call or text us at (318) 239-4860

MANSFIELD LOCATION ONLY

STEP 1: SELECT A PHYSICIAN

Rheumatology	
<input type="checkbox"/>	Dr. Richa Dhawan

STEP 2: ATTACH ITEMS *(attach all documents behind this coversheet)*

<input type="checkbox"/>	Patient Demographic Face sheet
<input type="checkbox"/>	Insurance Cards
<input type="checkbox"/>	Last Visit Note
<input type="checkbox"/>	Last X-rays/ imaging/ pathology
<input type="checkbox"/>	Last Labs
<input type="checkbox"/>	Diagnosis Documentation

STEP 3: COMPLETE THIS SECTION

Request Speed	<input type="checkbox"/> Urgent (1-2 days)	<input type="checkbox"/> Non-Urgent (5-7 days)
Today's Date		
Referring Provider		
Nurse / Contact Name	FAX #:	
Patient Name	DOB:	
Contact Information	HOME:	CELL:
Referring Diagnosis		