

## Interventional Radiology

101 Sivley Road, Huntsville, AL 35801

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Date of Referral: \_\_\_\_\_ Appointment request: Urgent  First Available Appointment 

### Referring Physician

*You can type your information directly into this form.*

Name of Practice: \_\_\_\_\_

Physician's Name: \_\_\_\_\_ Contact Person: \_\_\_\_\_

Physician's Office #: \_\_\_\_\_ Physician's Office Fax#: \_\_\_\_\_

### Patient Information

Patient's Name: \_\_\_\_\_ DOB: \_\_\_\_\_ SSN: \_\_\_\_\_

Patient's Address: \_\_\_\_\_

Patient's Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

Gender: \_\_\_\_\_ Does patient require interpreter? Y /N  Is patient on blood thinners? Y /N 

### Insurance Information

#### Primary Insurance

Policy#: \_\_\_\_\_

Group#: \_\_\_\_\_

#### Secondary Insurance

Policy#: \_\_\_\_\_

Group#: \_\_\_\_\_

Reason for referral: \_\_\_\_\_ Body system affected: \_\_\_\_\_

ICD Code: \_\_\_\_\_ Does patient's insurance require a referral? Y / N 

- Please provide most recent office note and/or history and physical, laboratory results, and transfer images to Finao or McKesson.
- All orders must be **signed** by the provider and include **date and time**.
- Patients will not be scheduled until all required information has been received.

Referrals may be faxed to 256-265-8748 or emailed to [HHIR@hhsys.org](mailto:HHIR@hhsys.org)

The Clinic for Radiology of Huntsville is located within Huntsville Hospital at Imaging Services on the ground floor