



Preferred Physician:  **Dr. T. Hemanth Rao**       **Dr. Paul MacDonald**       **Dr. Ryan Conrad**  
 **Dr. Andrea Rinn**       **Dr. Mark Ippolito**       **No Preference**       **Physical Therapy**

Please Select Location Preferred:       **First Available Location**

**Main Office**       **Charlotte Office**       **Monroe Office**       **South Charlotte**       **North Charlotte**  
2219 E 7<sup>th</sup> Street      2607 E 7<sup>th</sup> Street Ste200      1315 E. Sunset Dr. Ste201      7000 Shannon Willow Dr      10616 Metromont Pkwy, Ste104  
Charlotte, NC 28204      Charlotte, NC 28204      Monroe, NC 28112      Charlotte, NC 28226      Charlotte, NC 28269

**Is this appointment a STAT appointment**     **Yes**     **No**

Patient's Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Patient Phone: \_\_\_\_\_

Patient DOB: \_\_\_\_\_ Patient SSN: \_\_\_\_\_

Diagnosis: \_\_\_\_\_

Reason for Visit:     **Neuro Evaluation**     **EMG/ Nerve Conduction**     **EEG/Ambulatory (48hour)**     **EEG**     **Physical Therapy**

Referring Physician: \_\_\_\_\_

Is this the PCP for the Patient?     **Yes**     **No**    If No, Please List PCP \_\_\_\_\_

Referral Coordinator or Contact at Physician Office: \_\_\_\_\_

Referring Contact Phone: \_\_\_\_\_ FAX \_\_\_\_\_

\*The Neurological Institute will contact you via fax with confirmation of appointment time and date. Patient will receive new patient packet in mail.

\*Please contact the patient with appointment time & date.

Insurance Info:

Insurance Carrier: \_\_\_\_\_

**Toll Free Number of Insurance Company:** \_\_\_\_\_

Name of Insured: \_\_\_\_\_

Subscriber and/or Policy #: \_\_\_\_\_ Group# \_\_\_\_\_

If Carolina Access Medicaid, Please list Carolina Access Medicaid # \_\_\_\_\_

\*Clinical Notes and/or Labs & Diagnostic Studies are required to process new patient appointments.  
Please Fax those documents as well as other information with this FAX Form or prior to appointment date.