

# Health Care

Thank you for referring your patient to the neurosurgery team at University of Missouri Health Care. In order to expedite your patient's care we must have this completed referral request as well as copies of the following before an appointment can be made:

- Patient Demographic Information
- Copy of the Front and Back of Patient's Insurance Card
- Most Recent Clinic Note
- Applicable Labs or Tests
- Written Report of MRI or CT that has been done within the past 6 months
- Head Circumference Measurements for Pediatric Referrals under the age of 2

### Requesting New Patient Appointment with:

- Steven Carr, MD;  N. Scott Litofsky, MD;  Fassil Mesfin, MD, PhD;
- Thorkild V. Norregaard, MD;  Farhan Siddiq, MD;  Tomoko Tanaka, MD;  First Available

Referring Physician: \_\_\_\_\_ Office Contact: \_\_\_\_\_

NPI: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Patient Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Address: \_\_\_\_\_ SSN: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_

Primary Insurance: \_\_\_\_\_ Policy # \_\_\_\_\_

Secondary Insurance: \_\_\_\_\_ Policy # \_\_\_\_\_

Subscriber Name: \_\_\_\_\_ DOB: \_\_\_\_\_

### Referral reason: Please check the reason for the consultation and imaging study, including date.

- Brain
  - Brain Tumor,  Stereotactic Radiosurgery
- Cerebral vascular
  - Vascular Malformation (AVM),  Aneurysm,  Occlusion,  Dissection,  Sinus Thrombosis,  Other \_\_\_\_\_
- Functional
  - Epilepsy (VNS, surgical),  Parkinson Disease (DBS assessment, DBS battery change),  Essential tremor (DBS assessment, DBS battery change),  Spasticity (Baclofen Pump Placement, ITB battery change),  Normal Pressure Hydrocephalus,  Facial Pain/Facial spasm  Other \_\_\_\_\_
- Spine
  - Cervical:  Disk,  Stenosis,  Degenerative disease,  Tumor,  Syrinx,  Fracture
  - Thoracic:  Disk,  Stenosis,  Degenerative disease,  Tumor,  Syrinx,  Fracture
  - Lumbar:  Disk,  Stenosis,  Degenerative disease,  Tumor,  Syrinx,  Fracture
  - Other \_\_\_\_\_
- Congenital
  - Hydrocephalus,  Spina Bifida,  Cerebral Palsy,  Arachnoid Cyst,  Chiari Malformation,  Craniosynostosis,  Positional Plagiocephaly,  Pituitary Cyst,  Pineal Lesion,  Tethered Spinal Cord,  Scoliosis,  Other \_\_\_\_\_
- Traumatic
  - Concussion  Skull Fracture  Traumatic Brain Injury  Subdural Hemorrhage  Epidural Hemorrhage
  - Other \_\_\_\_\_
- Imaging Study:
  - X-ray: \_\_/\_\_/\_\_,  Brain CT: \_\_/\_\_/\_\_,  Spine CT: \_\_/\_\_/\_\_,  Brain MRI: \_\_/\_\_/\_\_,  Spine MRI \_\_/\_\_/\_\_