



**Neurology & Pain  
Management Center, PLLC**

*"Finding The Path To Better Health."*

***Nailesh Dave, MD***

**NEW PATIENT  
REFERRAL FORM**

Referral Fax: (910) 491-2903

Diplomat of American Board of Psychiatry and Neurology  
Diplomat of American Academy of Pain Medicine • Diplomat American Board of Psychiatry & Neurology Sleep Medicine

**PLEASE COMPLETE AND FAX TO OFFICE BELOW**

Patient: \_\_\_\_\_ Appt Date: \_\_\_\_\_ Appt Time: \_\_\_\_\_

Referral Type:  Evaluate and Treat  Evaluate (with Recommendations)  Trigger Point Injections

Epidural Only (Circle: Cervical, Thoracic/Lumbar)  Sacroiliac Injections  Spinal Taps

Facet Injs (Circle: Cervical, Lumbar)  Nerve Conduction/EMG  EEG

**Reason for Referral:**

- |  |   |   |   |
|--|---|---|---|
| <input type="checkbox"/> Headache        | <input type="checkbox"/> CVA/Stroke/TIA         | <input type="checkbox"/> Sleep Apnea      | <input type="checkbox"/> Epilepsy/SZ        |
| <input type="checkbox"/> Neuropathy      | <input type="checkbox"/> Arthritis              | <input type="checkbox"/> Numbness         | <input type="checkbox"/> Acute/Chronic Pain |
| <input type="checkbox"/> Myofascial Pain | <input type="checkbox"/> Weakness               | <input type="checkbox"/> Suboxone Therapy | <input type="checkbox"/> Neck/LB/Joints     |
| <input type="checkbox"/> Memory Loss     | <input type="checkbox"/> Carpal Tunnel Syndrome | <input type="checkbox"/> Dizziness        | <input type="checkbox"/> Other: _____       |

Insurance Coverage: \_\_\_\_\_

If work related, approval for treatment was authorized by: \_\_\_\_\_ Date: \_\_\_\_\_

Other: \_\_\_\_\_

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

<b>Santford Office</b> 1212 Central Dr. Suite 101 Santford, NC 27330 (919) 777-5455 Fax (919) 777-5294	<b>Lillington Office</b> 350 Pine State Street Lillington, North Carolina 27546 (910) 893-9700 Fax (910) 893-9747	<b>Fayetteville Office</b> 1291 Oliver Street Fayetteville, North Carolina 28304 (910) 491-2744 Fax (910) 920-3539	<b>Fayetteville Office</b> 5511 Ramsey Street (Suite 200) Fayetteville, North Carolina 28304 (910) 491-2744 Fax (910) 491-2903	<b>Benson Office</b> 325 South Walton Ave Benson, NC 27504 (919) 894-1003 Fax (919) 894-1336	<b>Mountsville Office</b> 6402 McChrimmon Pkwy Mountsville, NC 27560 (919) 234-6016 Fax (919) 650-2647	<b>Aberdeen Office</b> 180 Magnolia Square Court Aberdeen, NC 28315 (910) 984-1530 Fax (910) 757-0427
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