



Please fax both sides of completed referral

Ph: (410) 290-6677

F: (410) 290-6676

Gastroenterology Consult Request

- | | |
|--------------------------------------------------|--------------------------------------------------|
| <input type="checkbox"/> Rudy Rai, M.D. | <input type="checkbox"/> Dabo Xu, M.D. |
| <input type="checkbox"/> Pia Prakash, M.D. | <input type="checkbox"/> Dhruv Lowe, M.D. |
| <input type="checkbox"/> Joshua Rosenbloom, D.O. | <input type="checkbox"/> Thi Khuc, M.D. |
| <input type="checkbox"/> Eduardo Castillo, M.D. | <input type="checkbox"/> Alexander Mamunes, M.D. |
| <input type="checkbox"/> Farzin Rashti, M.D. | |

Patient Name: _____ **DOB:** _____

Contact Phone No: _____

Referring Physician: _____

Reason (s) for Referral:

- Consultation and Treatment
- EGD
- Colonoscopy
- Liver Biopsy
- ERCP
- Small Bowel Capsule Endoscopy
- OPTIFAST Weight Loss Diet Program
- Hydrogen breath Tests (Lactose/fructose intolerance)
- Helicobacter Pylori Breath testing
- Small Intestinal Bacterial Overgrowth (SIBO) Testing
- Orbera Intra-gastric Weight Loss Balloons

Other: _____



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Patient Insurance Information

Does this patient have United Healthcare? **

Yes No

****If patient has United Healthcare (UHC) please fill out referral online <https://www.uhcprovider.com/referral> and fax the referral to 410-290-6676****

Insurance Provider _____

Policy ID # _____ **Group #** _____

Referral/ Authorization information

Date of Referral: _____ Referral is valid until: _____

Number of visits authorized: _____

Authorization # (If required): _____

Signature: _____ Date: _____

Preferred Location(s):

Annapolis

1419 Forest Dr, Suite 105
Annapolis, MD 21403

Columbia

7120 Minstrel Way, Suite 100
Columbia, MD 21045

Olney

3405 Olandwood Court, Suite 102
Olney, MD 20832

Riverdale

6502 Kenilworth Ave, Suite 100
Riverdale, MD 20737

Timonium

1212 York Rd, Suite B201
Lutherville, MD 21093

Any / First Available