



PARADIGM SPINE CARE

AND INTERVENTIONAL PAIN MEDICINE

www.paradigmspinecare.net

PAIN MANAGEMENT REFERRAL

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T. Joel Berry, M.D.
Interventional Pain Medicine

Thomas J. Myers, M.D.
Interventional Pain Medicine

Seth Christian, M.D., MBA
Interventional Pain Medicine

Date: _____

Name: _____ DOB: _____

Phone #: _____ Patient SSN: _____

Chief Complaint: _____

Referring Physician: _____

Insurance Carrier: _____

**PLEASE SEND A COPY OF THE INSURANCE CARD
WITH THIS FORM.**

Special Instructions: _____

Please fax copy of referral form and any applicable medical records.

Patient should bring MRI and/or films and reports to consult visit.



PARADIGM
HEALTH SYSTEM