

SPINE *Fax*

FAST AND PAINLESS REFERRALS...



5 simple steps ...

Step #1

Fax the referral form to SpineFax 24 hours a day, seven days a week. This form includes patient name, contact info, reason for visit, and insurance info.

Step #2

You will receive a fax confirmation of the referral within minutes during patient care hours.

Step #3

We will attempt to contact and schedule your patient for an appointment in as early as 12-24 hours. Depending on the insurance provider, we will assist in verifying insurance eligibility.

Step #4

You will receive a fax confirmation of either an appointment or notice of three (3) failed attempts to contact the patient.

Step #5

Your patient receives Chiropractic care at Spine Wellness Center.

SPINE *Fax*

FAST AND PAINLESS REFERRALS...

Phone (702) 433-8333

Fax (702) 433-4632

Patient's Name: _____

Address: _____ City: _____ Zip: _____

Phone Number: (H) _____ (W) _____

Social Security Number: _____ D.O.B. _____

Patient Insurance: _____

Referring Physician: _____ / _____
(Signature) (Print Name)

Physician Phone: _____ Fax: _____

Date of Injury: _____

Reason For Exam / Clinical Data: _____

Thank you for your referral. We will contact the patient to schedule an appointment.

Please Bring This Form, Your Insurance Cards, I.D., Co-Pay
and All Pertinent X-Rays to Your Appointment

Spine Wellness Center
3085 E. Russell Rd. Ste E
Las Vegas, NV 89120

