

Referring Provider Referral Form



ORTHOPEDICS & NEUROSURGERY

The Region's Most Preferred.

PHONE: (360) 254-6161, option 1

FAX: (360) 803-0054

www.reboundmd.com

Please complete the section below with as much information as possible and fax this form to (360) 803-0054. Including patient demographics and chart notes helps to expedite your request. When your fax is received, a representative from Rebound Orthopedics & Neurosurgery will contact your patient directly to schedule an appointment.

Patient Information:

Patient Name: _____ Date of Birth: _____ Sex: _____

Patient Address: _____

Patient Phone: _____ Patient Email: _____

Primary Insurance: _____ Secondary Insurance: _____

Member ID: _____ Subscriber Date of Birth: _____

If **Motor Vehicle** or **Work Comp**, please provide the following information:

Insurance Carrier: _____ Claim Number: _____

Date of Injury: _____ Claim Adjuster: _____ Claim Adjuster Phone: _____

Appointment Type (Choose One):

Time Frame:

Orthopedics Physiatry Neurosurgery Next Available Urgent (within 1 – 2 weeks)

For emergent appointments (within 48 hours), please call our office at (360) 254-6161, option 1.

Referral Information:

Diagnosis/Reason for Referral: _____

Imaging: _____ (If imaging was done, please indicate the location of the images.)

To ensure timely and appropriate coordination of care, please provide the following:

- Relevant chart notes
- Diagnostic imaging (if done)
- Any and all tests or procedures pertaining to diagnosis (For NCV/EMG studies, please include numeric data.)
- Copy of insurance card and information and authorization if required

Referring Provider: _____ Referring To: _____

For a comprehensive list of our providers and their specialties, please visit Reboundmd.com

Referral Coordinator: _____ Phone: _____ Fax: _____

Comments: _____

Rebound Vancouver
Physicians' Pavilion
200 Northeast Mother Joseph Place
Suite 110
Vancouver, WA 98664

Rebound Rose Quarter
One North Center Court Street
Suite 110
Portland, OR 97227

Rebound Salmon Creek
Medical Office Building A
2121 Northeast 139th Street
Suite 300
Vancouver, WA 98686

Rebound Camas
3205 Southeast 192nd Avenue
Suite 105
Vancouver, WA 98683

Rebound Lake Oswego
4811 Meadows Road
Suite 101
Lake Oswego, OR 97035

Rebound Total Joint Center Vancouver
Physicians' Pavilion
200 Northeast Mother Joseph Place
Suite 305
Vancouver, WA 98664

Rebound Neurosurgery Vancouver
Physicians' Pavilion
200 Northeast Mother Joseph Place
Suite 300
Vancouver, WA 98664

Rebound Neurosurgery Rose Quarter
One North Center Court Street
Suite 110
Portland, OR 97227