



HENRY COMMUNITY HEALTH

Interventional Spine & Pain

New Castle Family & Internal Medicine Forest Ridge • Muncie

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Scott Taylor MD & Andy Davisson, MD

Board Certified in Physical Medicine & Rehabilitation

Becky Layman, PA-C, Kristin Shields, PA-C

Karey Davis, PA-C

Physical Medicine & Rehabilitation

New Patient Referral

Patient Name: _____ DOB: _____

Referring Provider: _____

Referring Provider Phone: _____ Fax: _____

Person sending Referral: _____

Patient Contact Number: _____

Patient Mailing Address: _____

Primary Insurance: _____ Secondary Insurance: _____

Reason for Referral: _____

SCS/DRG Evaluation: _____ ESI Evaluation: _____ Joint Injection: _____

Vertiflex-Spinal Spacer Surgery _____

EMG (please circle): RUE LUE BUE LLE RLE BLE

Previous Imaging (please circle): X-rays MRI CT

When Imaging was done: _____

Where was Imaging done: _____

Physical Therapy/Chiropractic Treatment: _____

Referring Provider: Please send Patient Demographics, copy of Insurance card, pertinent office notes and Imaging reports.

Thank you for your Referral