David L. Spivey, MD
Medical Director
Board Certified, Pain Medicine

Jeffery A. Adams, MD
Board Certified, Pain Medicine

Chad Caldwell, MHS, PA-C
Michael Roche, PA-C
Pamela Campbell, PA-C

Preferred
Pain Management & Spine Care

Relieve Pain. Restore Function...Resume Life.

2912 Maplewood Avenue
Winston-Salem, NC 27103
336.760.0706 ph
336.760.1927 fx

1511 Westover Terrace, Suite 107
Greensboro, NC 27408
336.398.5155 ph
336.398.5156 fx

PreferredPainManagement.com

Referral form

PLEASE FAX THE FOLLOWING WITH THIS FORM TO – (336) 760-1927:

- **DOCTOR'S LAST AVAILABLE OFFICE NOTE**
- **INSURANCE CARD (S) FRONT & BACK**
- **ALL RADIOLOGY REPORTS RELATED TO REASONS FOR REFERRAL**

Date: _____ Referring MD/Group: _____

NPI #: _____ Phone: _____

Contact: _____ Fax: _____

Patient Name: _____ SS#: _____

DOB: _____ Phone (s): _____

Address_____

Primary Insurance Co: _____ Co-pay: _____

ID#: _____ Carolina Access #: _____

Secondary Insurance: _____ ID #: _____

Reasons for Referral / dx: _____

____Eval & Treat	____Discogram	____SI Joint
____CESI	____Cervical Facet	____Trans LESI
____TESI	____Lumbar Facet	____Triggers
____LESI	____Major Joint	____LSB

NEW PATIENT PACKET MAILED_____ INITIALS_____