

A Clear Vision of Excellence

Fax All Referral Requests to 704-635-7784 Alternate Fax 704-291-2207

Referral Form

General Ophthalmology	☐ Urgent/Emergency:	(specify)
☐ Ivan Mac, M.D.	Patient Name:	211172
N 100		DOB:
☐ Dara Khalatbari, M.D.		
Ophthalmic Plastics &	Referring Physician:	Date:
	Phone:	Fax:
Facial Plastic Surgery	Insurance/Policy #	
☐ Christine Annunziata, M.D.	☐ Medicare	☐ Blue Cross/Blue Shield
Pediatric Ophthalmology & Adult Strabismus ☐ Melissa Shipley, M.D.	☐ Aetna	☐ Cigna
	☐ Medcost	☐ United Healthcare
	☐ Workman's Compensation	- Officer realificate
	☐ Medicaid	
		# of Authorized
Glaucoma & General	Group Tit "	# 017 dufforfized
Ophthalmology	☐ Other:	
□Ninita Brown, M.D., Ph.D.	Reason:	
	☐ LASIK Surgery	☐ Eyelid Lesion
Optometry	☐ Eye Exam	☐ Ptosis/Dermatochalasis
☐ Jason Berkebile, O.D.	☐ Glasses/Contacts	☐ Plaquenil Screening
☐ Stacy Schorner, O.D.	☐ Diabetic Eye Exam	☐ Strabismus
☐ Sean Pitale, O.D.	□ Glaucoma	☐ Headache/Migraine
and the second section of the section of t	□ Floaters	☐ Nasolacrimal Duct
Metro Medical Campus 630 Comfort Lane, Suite E	☐ Ocular Irritation	☐ Tearing
	□ Diplopia	☐ Eyelid Malposition
Monroe, NC 28112	☐ Failed Vision Screening	☐ Thyroid Eye Disease
(704) 289-5455	☐ Foreign Body	☐ Facial Spasm
Stallings Professional Contor	☐ Cataracts ☐ Patient will not be comanage	for insurance reasons.
Stallings Professional Center 4101 Campus Ridge Road	☐ Other:	
Matthews, NC 28105 (704) 234-1930	NOTES:	
Carolina Commons Medical Center 6237 Carolina Commons Dr. #300	*Our goal is to contact pat	ients within 24 hours Please he advised

*Our goal is to contact patients within 24 hours. Please be advised, Medicaid can take up to 72 hours to process for eligibility.

FOR QUESTIONS/ISSUES ABOUT YOUR REFERRAL PLEASE CALL 704-774-1165 OR 704-289-5455 referrals.mea@gmail.com

Indian Land, SC 29707

(803) 547-3937