



Date _____

REFERRAL PRIORITY REQUEST

- ☐ EMERGENCY - Call (704) 774-1165
☐ Urgent - Within 7 Days
☐ Next Available Appointment

LOCATION REQUESTED

- ☐ Matthews ☐ Monroe ☐ Randolph Rd. ☐ University
☐ Indian Land ☐ Rock Hill ☐ Pineville
Preferred Physician (optional): _____

Referring Provider Information (Required)

Name: _____ NPI: _____
Practice Name: _____
Address: _____
Phone: _____ Direct Fax: _____

Referring Provider Information (Required)

☐ ATTACH DEMOGRAPHIC SHEET

→ Attach only if all requested patient information has been provided.

Patient Name: _____ DOB: _____
Patient Address: _____
Phone #1: _____ Phone #2: _____
Insurance: _____ Policy Number: _____
Preferred Language: _____ ☐ Needs Translator Gender: ☐ Male ☐ Female

REASON

- | | | |
|--|--|---|
| ☐ ARMD - Dry Only | ☐ Facial Spasms | ☐ Plaquenil Screening |
| ☐ Blepharitis | ☐ Failed Vision Screening | ☐ Ptosis/Dermatochalasis |
| ☐ Cataracts | ☐ Floaters | ☐ Refractive Lens Exchange |
| ☐ ☐ Patient will not be co-managed | ☐ Foreign Body | ☐ RLE Consultation |
| ☐ Cornea Transplant | ☐ Fuchs' Dystrophy | ☐ Surface Disease |
| ☐ Corneal Abrasion | ☐ Glaucoma | ☐ Tearing |
| ☐ Corneal Disease | ☐ Graves' Disease | ☐ Thyroid Eye Disease |
| ☐ CSR | ☐ Headaches/Migraine | ☐ Uveitis |
| ☐ Diabetic Eye Exam | ☐ Keratoconus | ☐ Valeda |
| ☐ Diplopia | ☐ LASIK/PRK/ICL | ☐ Yag Evaluation |
| ☐ Eye Exam/Glasses/Contacts | ☐ Mohs Repair | |
| ☐ Eyelid Lesion | ☐ Nasolacrimal Duct | |
| ☐ Eyelid Lesion/Hordeolum | ☐ Ocular Irritations | |
| ☐ Eyelid Malposition | ☐ Open Globe Repair | |

Additional Comments: _____

Our goal is to contact patients within 24 hours. Please note, Medicaid eligibility verification may take up to 72 hours. To help prevent scheduling delays, please ensure all referral information is accurate and include visit note(s) relevant to this referral.

FAX COMPLETED FORM TO 704-635-7784. For additional support or questions about your referral, please call us at 704-774-1165 or email referrals@metrolinaeye.com



METROLINA EYE ASSOCIATES

A CLEAR VISION OF EXCELLENCE



SCAN QR CODE:
MEA Referral Options

REFERRALS DEPARTMENT:

Tel: 704-774-1165

Fax: 704-635-7784

Email: referrals@metrolinaeye.com

OFFICE LOCATION

DOCTORS & SPECIALTY

MATTHEWS

4101 Campus Ridge Rd.
Matthews, NC 28105

Ivan Mac, MD, MBA
Christine Annunziata, MD*
Charles Blotnick, MD
Luke Peterson, MD*
Douglas Brown, MD*
Kasey Ratliff, PA-C
Spring Plihcik, OD
Kalie Leone, OD*
Madison Angell, OD*
Kara Dunkle, OD*

Cataract / Refractive (RLE, LASIK, PRK, EVO ICL) / Glaucoma
Oculofacial Plastic Surgery
Cataract / Refractive (RLE, LASIK, PRK, EVO ICL) / Glaucoma
Glaucoma/General Ophthalmology/Cataract/RLE
Cornea / Cataract / Refractive (LASIK, PRK, EVO ICL, RLE)
Physician's Assistant to Dr. Annunziata
Optometry
Optometry
Optometry
Optometry

MONROE

630 Comfort Ln.
Monroe, NC 28112

Ivan Mac, MD, MBA
Christine Annunziata, MD*
Luke Peterson, MD*
Douglas Brown, MD*
Kasey Ratliff, PA-C
Spring Plihcik, OD
Madison Angell, OD*
Sunny Bhathela, OD

Cataract / Refractive (RLE, LASIK, PRK, EVO ICL) / Glaucoma
Oculofacial Plastic Surgery
Glaucoma/General Ophthalmology/Cataract/RLE
Cornea / Cataract / Refractive (LASIK, PRK, EVO ICL, RLE)
Physician's Assistant to Dr. Annunziata
Optometry
Optometry
Optometry

UPTOWN

2015 Randolph Rd. Ste. 108
Charlotte, NC 28207

Charles Blotnick, MD
Christine Annunziata, MD*
Douglas Brown, MD*
Kalie Leone, OD*
Kimberly Cao, OD
Kara Dunkle, OD*

Cataract / Refractive (RLE, LASIK, PRK, EVO ICL) / Glaucoma
Oculofacial Plastic Surgery
Cornea / Cataract / Refractive (LASIK, PRK, EVO ICL, RLE)
Optometry
Optometry
Optometry

UNIVERSITY

8816 University East Dr. Ste. C
Charlotte, NC 28213

Charles Blotnick, MD
Douglas Brown, MD*
Kalie Leone, OD*
Kimberly Cao, OD
Kara Dunkle, OD*

Cataract / Refractive (RLE, LASIK, PRK, EVO ICL) / Glaucoma
Cornea / Cataract / Refractive (LASIK, PRK, EVO ICL, RLE)
Optometry
Optometry
Optometry

INDIAN LAND

6237 Carolina Commons Dr.
Ste. 300
Indian Land, SC 29707

Ivan Mac, MD, MBA
Luke Peterson, MD*
Christine Annunziata, MD*
Douglas Brown, MD*
Kasey Ratliff, PA-C
Bonita Miles, OD
Sunny Bhathela, OD
Bobi Yang, OD

Cataract / Refractive (RLE, LASIK, PRK, EVO ICL) / Glaucoma
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Physician's Assistant to Dr. Annunziata
Optometry
Optometry
Optometry

ROCK HILL

724 Arden Ln. Ste. 120
Rock Hill, SC 29732

Luke Peterson, MD*
Bonita Miles, OD
Bobi Yang, OD

Glaucoma/General Ophthalmology/Cataract/RLE
Optometry
Optometry

PINEVILLE

8429 Pineville-Matthews Rd
Charlotte, NC 28226

Matthew Carpenter, OD
Sunny Bhathela, OD

Optometry
Optometry

* Fellowship-Trained (MD) | Residency-Trained (OD)