

Please fill out the form <u>COMPLETELY</u> and <u>LEGIBLY</u> to ensure efficient scheduling. Attach all pertinent records, including insurance cards, and fax them to (256) 535-9032. We will contact your patient and schedule the appointment. Per NALENT policy, we must have **INSURANCE AUTHORIZATIONS** before scheduling.

Referring Provider: Phone:			NPI#:	NPI#:	
			Fax:		
Reason for Referral:				(NO ICD CODES PLEAS	
Preferred Location:	1963 Memo Huntsville <i>i</i>	☐ Huntsville Office  1963 Memorial Parkway SW, Suite 5 Huntsville AL 35801		☐ Madison Office 8337 Hwy. 72 W, Suite 301 Madison AL 35758	
<ul> <li>Preferred Provider (I</li> </ul>	∟eave blank for n	no preference):			
☐ <b>Jasper Castillo, M.D.</b> Pediatric Otolaryngology		☐ <b>Michael McFadden, M.</b> E General ENT: Adult/Peds		☐ <b>Katie Robinson, PA-C</b> Physician Assistant	
☐ Bradley Hobbs, M.D. General ENT: Adult/Peds ☐ John Kostrzewa, M.D.		☐ William McFeely, M.D.  Otology/Neurology: Hearing Loss, Tinnitus, Dizziness and Balance		<ul><li>☐ Alexander Williams, PA-C</li><li>Physician Assistant</li><li>☐ Kyra Robinson, PA-C</li></ul>	
General ENT: Adult/Peds		Problems, Other Ear Problems  Dr. Samih Nassif Abudinen, M.D.		Physician Assistant	
☐ <b>Ken Teachey, M.D.</b> Head & Neck Cancer, Thyroid and Parathyroid Problems		Head & Neck Cancer, Thyroid and Parathyroid Problems		☐ <b>Jennifer Avans, NP</b> Nurse Practitioner	
		☐ <b>Scott McCary, M.D., FAC</b> General ENT: Adult/Peds		☐ <b>Hannah Denton, NP</b> Nurse Practitioner	
ENT IS NO LONGER A PROVI				EALTHSPRINGS, CIGNA MEDICARE, CIGNA TOTAL CARE,	
GEHA, MEDICAID-OUT OF M Patient Information:  First Name:	MADISON COUNTY, S	Last Name:	RIWEST, UHC, UH	C MEDICARE ADVANTAGE HMO, VA AND WELLCARE.  MI:	
Patient Information:	MADISON COUNTY, S		RIWEST, UHC, UH		
Patient Information: First Name:	MADISON COUNTY, 5		RIWEST, UHC, UH	MI:	
Patient Information: First Name: Address:	MADISON COUNTY, 5	Last Name:	RIWEST, UHC, UH	MI: Zip Code:	
Patient Information:  First Name:  Address:  Phone:	MADISON COUNTY, 5	Last Name:  Alt. Phone:	RIWEST, UHC, UH	MI: Zip Code:	

If you have any questions, please call us at (256) 536-9300.