



**PAIN PROGRAM
ACCREDITATION**



Comprehensive Pain Management

Minimizing pain. Changing lives.

Louisiana's **FIRST** and *Only* Accredited **Comprehensive Pain Center**

225-368-2300 - Phone
225-368-2280 - Fax
225-368-2353 - Referral Questions Direct Line

9118 Bluebonnet Centre Blvd.
Baton Rouge, Louisiana 70809
www.thepainspecialist.com

UPON RECEIPT OF THE FOLLOWING INFORMATION, PATIENT WILL BE CONTACTED TO SCHEDULE AN APPOINTMENT.

- Demographic sheet
- Copy of insurance Card (Front & Back)
- Medical Records, MRI, Cat Scan and/or X-Rays
- COMPLETED Referral Form

FAX TO: 225-368-2280

CONTACT INFO:

Date _____ Patient's Name _____ Referring Diagnosis _____

Date of Birth _____ SS No. _____

Home No. _____ Work No. _____ Cell# _____

Referring MD _____ NPI # _____

Office No. _____ Fax No. _____

PAYMENT INFO:

___ Insurance ___ W/C ___ Attorney

If W/C, Carrier _____ Claim #: _____

SERVICES REQUESTED:

- Pain Management evaluation and treatment
- Pain Management Consultation
- Injection: (Please check injection below)
- Other _____

PROVIDER REQUESTED:

- 1st available
- Sandra R. Weitz, MD (NPI#1922131754)
- Alpesh D. Patel, MD (NPI#1326092610)
- Tulsi N. Bice, MD (NPI#1356370589)
- Seif M. Elbualy, MD (NPI # 1881644979)

62310	EPIDURAL STEROID INJECTION CERVICAL
62310	EPIDURAL STEROID INJECTION THOR.
62311	EPIDURAL STEROID INJECTION LUMBAR
62311	EPIDURAL STEROID INJECTION CAUDAL
64490	MEDIAL BRANCH BLOCK/FACET, CERVICAL/THORACIC 1ST
64493	MEDIAL BRANCH BLOCK/FACET, LUMBAR 1ST LEVEL
27096	SACROILIAC JOINT INJECTION

22520	VERTEBROPLASTY THORACIC
22521	VERTEBROPLASTY LUMBAR
64479	TRANSFORAMINAL/SNRB, CERVICAL/THORACIC
64483	TRANSFORAMINAL /SNRB, LUMBAR
64420	INTERCOSTAL NERVE BLOCK
62291	DISCOGRAPHY, CERVICAL/THORACIC ___ LEVELS
62290	DISCOGRAPHY, LUMBAR ___ LEVELS

*INJECTION ONLY REFERRALS REQUIRE A PRE-CERT FROM TREATING PHYSICIAN

Comprehensive Pain Management Tax id: 562442944 Advanced Surgical Concepts Tax id: 331035210

Pre-Authorization# _____