St. Vincent de Paul Virginia G. Piper Medical Clinic
Phone: 602.261.6825 Fax: 602.261.6816

420 W. Watkins Road
Phoenix, AZ 85003

REFERRING CLINIC INFORMATION

CLINIC: ________________________________ **PROVIDER:** ______________________
PHONE: ________________________________ **FAX:** ____________________________

PATIENT INFORMATION

PATIENT NAME: __________________________ **DOB:** ____________________________
LANGUAGE: _____________________________ **PHONE:** __________________________

***PEDIATRIC SERVICES AVAILABLE ONLY FOR THESE SPECIALTIES**

- ☐ Acupuncture
- ☐ *Allergy/Immunology/Asthma
- ☐ *Audio/Cognition
- ☐ Cardiology (NO SURGERY/CATH)
  - ☐ Echo
  - ☐ Holter
- ☐ *Dermatology
- ☐ Diabetes Self-Management Education
- ☐ Prediabetes Education
- ☐ General Surgery (REQUIRES IMAGING RESULTS)
- ☐ *GI (NO HEMORRHOIDS, NO SCOPES)
- ☐ *Gynecology (NO FAMILY PLANNING)
- ☐ Infectious Disease
- ☐ Nephrology (NO PATIENTS ON DIALYSIS)
- ☐ Neurology (NO EEGs)
  - ☐ EMG
- ☐ *Orthopedic/Sports Medicine (REQ. IMAGING RESULTS)
- ☐ *Ophth/Optomery (NO SURGERIES)
  - ☐ DM Rethinopathy Screening- Last A1C: _______
- ☐ PAP Smear/WWE- Last Pap Dates: Circle One
  - ☐ Date: ______________ Normal Abnormal
  - ☐ Date: ______________ Normal Abnormal
- ☐ *Pediatrics
- ☐ *Podiatry
- ☐ Psychiatric
- ☐ Pulmonology
  - ☐ Sleep Study
- Radiology Services
  - ☐ Del E Webb Xray Clinic
  - ☐ Screening Mammogram ONLY (ASYMPTOMATIC)
  - ☐ *Richardson Ultrasound Clinic
- ☐ Speech/Swallow
- Rehabilitation Services
  - ☐ *Occupational Therapy
  - ☐ Physical Therapy
- ☐ *Rheumatology
- ☐ Urology
- ☐ Wound

***REQUIRED TO INCLUDE SUMMARY OF CARE, REASON OF REFERRAL AND MOST RECENT PERTINENT NOTES, LABS & IMAGING**

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***SERVICES AT SVdP ONLY FOR UNINSURED/FES PATIENTS** **UPDATED 5/2024**