

REFERRAL FORM

Fax Number: (518) 292-2782 Appointment Line: (518) 489-2666

Orthopaedic Excellence. Exceptional Care.

www.TheBoneAndJointCenter.com

Please select an option below to schedule an appointment with The Bone & Joint Center.

- Patient: Please call our office at (518) 489-2666 to schedule your appointment with one of our orthopaedic doctors.
- Referring Physician: Please complete the section below, and fax this form to (518) 292-2782. When your fax is received, a representative from The Bone & Joint Center will contact your patient directly to schedule an appointment.

Patient Name: _____ Date of Birth: _____

Patient Address: _____

Patient Email Address: _____

Symptoms/Diagnosis: _____

How did this injury occur: N/A Workers' Compensation Other: _____

Patient has completed: Digital X-Ray MRI EMG X-Rays Cast/Splint Applied

Referred By: _____

Referring Physician Phone Number: _____ Referring Physician Fax Number: _____

Referred To: _____

Appointment Time Frame: Urgent Within ____ Weeks Nonurgent

Records Attached: Yes No

OUR DOCTORS

- | | |
|--|---|
| <input type="checkbox"/> Richard H. Alfred, M.D. | <input type="checkbox"/> James Lawrence, M.D. |
| <input type="checkbox"/> R. Maxwell Alley, M.D. | <input type="checkbox"/> Jordan M. Lisella, M.D. |
| <input type="checkbox"/> Kaushik Bagchi, M.D. | <input type="checkbox"/> Jeffrey Lozman, M.D. |
| <input type="checkbox"/> Samuel S. Caldwell, M.D. | <input type="checkbox"/> Abigail Mantica, M.D. |
| <input type="checkbox"/> Robert A. Cheney, M.D. | <input type="checkbox"/> Patrick G. Marinello, M.D. |
| <input type="checkbox"/> Ernest N. Chisena, M.D. | <input type="checkbox"/> Andrew S. Morse, M.D. |
| <input type="checkbox"/> Cory Czajka, M.D. | <input type="checkbox"/> Michael T. Mulligan, M.D. |
| <input type="checkbox"/> John Czajka, M.D. | <input type="checkbox"/> Daniel T. Phelan, M.D. |
| <input type="checkbox"/> Shankar P. Das, M.D. | <input type="checkbox"/> David E. Quinn, M.D. |
| <input type="checkbox"/> Matthew R. DiCaprio, M.D. | <input type="checkbox"/> Jared T. Roberts, M.D. |
| <input type="checkbox"/> John A. DiPreta, M.D. | <input type="checkbox"/> Andrew Rosenbaum, M.D. |
| <input type="checkbox"/> Michael A. Flaherty, M.D. | <input type="checkbox"/> James M. Schneider, M.D. |
| <input type="checkbox"/> Marc D. Fuchs, M.D. | <input type="checkbox"/> Todd Shatynski, M.D. |
| <input type="checkbox"/> Andrew C. Gerdeman, M.D. | <input type="checkbox"/> Joachim J. Tenuta, M.D. |
| <input type="checkbox"/> Alexander R. Harbin, M.D. | <input type="checkbox"/> Jon T. Toussaint, M.D. |
| <input type="checkbox"/> Robert J. Hedderman, M.D. | <input type="checkbox"/> Richard L. Uhl, M.D. |
| <input type="checkbox"/> Paul P. Hospodar, M.D. | <input type="checkbox"/> Richard R. Whipple, M.D. |
| <input type="checkbox"/> Anjum Iqbal, M.D. | <input type="checkbox"/> George Zanos, M.D. |
| <input type="checkbox"/> Hamish A. Kerr, M.D. | <input type="checkbox"/> Joseph P. Zimmerman, M.D. |

OUR LOCATIONS

- | | |
|--|--|
| <input type="checkbox"/> Albany – Main Location
1367 Washington Avenue, Suite 300
Albany, NY 12206
Phone: (518) 489-2666 | <input type="checkbox"/> Malta
6 Medical Park Drive, Suite 201
Malta, NY 12020
Phone: (518) 289-2171 |
| <input type="checkbox"/> Catskill
146 Jefferson Heights, Suite 101
Catskill, NY 12414
Phone: (518) 943-0667 | <input type="checkbox"/> Saratoga
92 East Avenue
Saratoga Springs, NY 12866
Phone: (518) 584-0295 |
| <input type="checkbox"/> Clifton Park
989 Route 146, Building 300
Clifton Park, NY 12065
Phone: (518) 383-0617 | <input type="checkbox"/> Schenectady
3757 Carman Road
Schenectady, NY 12303
Phone: (518) 831-2957 |
| <input type="checkbox"/> Latham
1019 New Loudon Road
Latham, NY 12047
Phone: (518) 608-8876 | |