

Authorization #

16511-A Northcross Drive, Huntersville, NC 28078 417 W. Warren Street, Shelby, NC 28150

527 Brookdale Drive, Statesville, NC 28677

500 E. Cornwallis Drive Ste. G, Greensboro, NC 27405

REFERRAL PHONE:	1-800-605-3418
REFERRAL FAX:	1-800-518-6271

Locations patient would prefer (check the box to select): ☐ 16511-A Northcross Dr., Huntersville, NC 28078 *Suboxone Treatment Available ☐ 417 W Warren St., Shelby, NC 28150 *Suboxone Treatment Available ☐ 527 Brookdale Dr., Statesville, NC 28677 *Suboxone Treatment Available □ 500 E Cornwallis Dr. Ste. G, Greensboro NC 27405 *Suboxone Treatment Available Date of Referral: Referral Contact: Referring Physician: _____ NPI: _____ Office Fax: (_____)______Office Phone: _____)_____ Patient Name: Patient DOB: _____ Patient Phone: (____) Chief Complaint: _____ Please include the following: Datient incurance information and demographics

Patient insurance information and demographics
Any PCP records and labs (6-12 months)
Any imaging studies of pain area
Any surgical/ortho reports on pain area
Drug Screen results
Records from any pain clinic they were seen at previously