

Thank you for your referral to our practice. We ask that you please forward the following records including the **LAST OFFICE NOTES, X-RAY REPORTS, DEMOGRAPHICS** and a **COPY OF ALL INSURANCE CARDS**. Please complete and return this referral sheet along with the requested information and we will notify your office with the appointment.

Patient Name: _____

Patient Phone: _____ DOB: _____

Referring Provider: _____

Practice Contact: _____

Practice Phone: _____

Diagnosis _____

To be completed by office staff

Appointment Date: _____

Appointment Time: _____

Appointment Location: _____

Interventional Radiology Procedures

Endovascular

1. Angiography / Angioplasty
2. Aortic Stenting (EVAT/ TEVAR)
3. Aneurysm & Pseudoaneurysm
4. Deep Vein Thrombosis

Hepato-Biliary

1. TIPS / DIPS (Porto Systemic Shunts)
2. TJLB & HVPB
3. Hemangioma Embolization
4. Biliary Drainage (PTBD) & Stenting
5. Percutaneous Drain Catheter

Urology

1. Prostatic Artery Embolization
2. Varicocele Embolization
3. TRUS Guided Prostate Biopsy
4. Renal Cancers Embolization And RFA

Cosmetic

1. Varicose Vein & Leg Ulcers
2. PRP for Hair Growth
3. Botox & Steroid Injections

ENT

1. JNAF Embolization

Oncology

1. Tumor Embolization
2. RFA / Microwave Ablation
3. Chemo Lines / Port
4. Biopsy / FNAC

Pulmonary Science

1. Bronchial Artery Embolization
2. Pulmonary Artery Thrombectomy
3. Tracheal & Bronchial Stenting
4. Lung Mass Biopsy

Neurology

1. Stroke Management
2. Carotid Artery Stenting
3. Aneurysm Coiling
4. AVMs

Orthopedics

1. Genicular Artery Embolization OA
2. Vertebroplasty / Kyphoplasty
3. Osteoid Osteoma RFA
4. Pain Management

Gastroenterology

1. Gastro Intestinal Bleeding
2. Pseudo Aneurysms Coiling
3. Variceal Bleed (BRTO / PRTO)
4. Hemorrhoid / piles
5. Esophageal/ Duodenal/ Colonic Stenting

Nephrology

1. Renal Angioplasty
2. Fistula Creation & Dialysis Catheter
3. Renal AML Embolization
4. Percutaneous Nephrostomy & DJ Stenting

Obstetrics & Gynecology

1. Fibroid/Uterine Artery Embolization
2. Pelvic Congestion Syndrome
3. Fallopian tube Recanalization
4. Balloon Assisted Delivery

Pediatric Care

1. Drain Catheter
2. Tumour Biopsy
3. Retinoblastoma (OAC)
4. Sclerotherapy