


Rheumatology Associates, P.C.
2145 Highland Avenue South
Suite 200
Birmingham, AL 35205

To whom it may concern:

Thank you for referring your patients to our office. We now require a new patient referral form to be filled out and faxed to our office, along with medical records supporting the diagnosis and ICD-10 code including most recent lab results and x-ray reports for all new patients. We will no longer schedule a new patient appointment without the referral form and records. We thank you in advance for your cooperation. We look forward to seeing your patients.

Sincerely,



Mary Pilkerton, Administrator

Rheumatology Associates, P.C.
Alan Paul, M.D.
Anthony Saway, M.D.
Joel Abbott, M.D.
Anthony Turkiewicz, M.D.
Henry Townsend, M.D.
Ryan Weldon, M.D.
Laura Parks, M.D.
Maura Kennedy, M.D.

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Laura Parks, M.D.

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New Patient Referral Information

Referring Physician _____

Specialty _____

NPI# _____ Office Contact _____

Physician Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____

Patient's Primary Care Physician (required) _____

(We can no longer schedule a patient who does not have an active PCP.)

Patient Name _____

SS# _____ DOB _____

Home Number _____ Cell Number _____

Please specify which doctor you prefer or first available _____

Diagnosis _____

ICD-10 code _____

***We can no longer accept a diagnosis without the appropriate ICD-10 code, please include both.**

Please attach the following:

-front and back of the insurance card(s)

-demographic sheet

-records supporting the diagnosis

-labs supporting diagnosis (ex: ANA, RF, Anti-CCP, ESR, CRP, Uric Acid)

Please note: We will NOT make New Patient appointments without records.