WVU Medicine

Obstetrics and Gynecology Referral

PHONE: 304-848-2150 FAX: 304-848-2153 527 Medical Park Drive, Suite 108, Bridgeport, WV 26330

Date of Referral: _____/_____/_____

Referring Physician: _____ Contact Person: _____

Phone #: _____ Fax #: _____

Address: _____

Reason for Referral: _____

PATIENT INFORMATION

Name: (Last) _____ (First) _____ (MI) _____

DOB: _____/_____/_____ Social Security #: _____

Address: _____

Home #: _____ Cell #: _____ Work #: _____

INSURANCE INFORMATION

Insurance Co. Name: _____

Policy ID #: _____ Subscriber's Name: _____

PROVIDER PREFERENCE

OB/GYN Providers

- ☐ First available
- ☐ Matthew J. Honaker, MD
- ☐ Richard King, MD
- ☐ Janell Mace, MD
- ☐ Marissa Barberio Saas, PA
- ☐ Stephanie Hurst, CNM
- ☐ Myna Smith, CNM

Urogynecology Providers

- ☐ First available
- ☐ Omar Duenas, MD
- ☐ Robert Shapiro, MD

PATIENT DOCUMENTS

☐ WVHIN ☐ EPIC

If not, FAX or MAIL the following:

- ☐ Patient records
- ☐ Previous treatments for conditions
- ☐ Procedure(s) requested, if applicable
- ☐ Copy of insurance/Rx card