Ste 200 (Upper level
Iyad Al-Shwaf MD
Kevin Duffy PA
Lauren Kaylor PA
Aastyn Guarino PA
Natalie Skaryd PA
Anna Jachimowicz PA
Marie Sighe-Nzokou NP

Great Lakes Center of Rheumatology

Arthritis, Osteoporosis, and Autoimmune Diseases

Suite 100 (Lower level)
Amy Trinh DO
John Kolstoe MD
Timothy Palmer PA
Eleanor Dionise PA
Katelin Bensman PA

Joshua June, DO

4052 Legacy Parkway Suite 200 (upper level)/ 100 (lower level) Lansing, MI 48911

Phone: 517-272-9700 Fax: 517-272-9706 or 517-853-8238

New Patient Referral Form

Date: _____ Referring Physician: _____

Address: _____

Phone: _____ Fax: _____

We will consult and treat for Rheumatology related issues ONLY

Patient Name: _____ Sex: _____ Date of Birth: _____

Address: _____

City/State/Zip: _____

Home Phone: _____ Work Phone: _____

Family Physician: _____

Insurance: ☐ Medicare ☐ BCBS ☐ PHP ☐ BCN ☐ AETNA ☐ Other: _____

***** Please send the last 2 recent office notes, labs, and imaging ****

If the correct information is not received, the referral will be **denied and sent back to the referring office** due to lack of information.

APPOINTMENT REQUESTED ☐ Urgent ☐ Routine

Reason for consultation, symptoms, diagnosis: _____

_____

_____

WE DO NOT ACCEPT UNITED HEALTHCARE, WORKMANS COMP

OR AUTOMOTIVE RELATED CASES