

**REFERRING PHYSICIAN**

Physician Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Clinic Contact: \_\_\_\_\_ Fax: \_\_\_\_\_

Reason For Appointment: \_\_\_\_\_

**PATIENT INFORMATION –please include demographic sheet with records**

Patient Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Patient Contact Number: Home# \_\_\_\_\_ Cell# \_\_\_\_\_

**REQUESTED PHYSICIAN – Huntsville Location****GENERAL CARDIOLOGY**

- |  |  |  |   |
|--|--|--|---|
| <input type="checkbox"/> <b>FIRST AVAILABLE</b>  | <input type="checkbox"/> <b>PRIOR CARDIOLOGIST UNKNOWN</b> |  |   |
| <input type="checkbox"/> Rashida A. Abbas, MD    | <input type="checkbox"/> Carl J. Gessler, MD               | <input type="checkbox"/> Mihir Kanitkar, MD    | <input type="checkbox"/> P. Gautam Reddy, MD      |
| <input type="checkbox"/> Michael M. Butler, MD   | <input type="checkbox"/> Jacqueline Green, MD              | <input type="checkbox"/> M. Asim Khan, MD      | <input type="checkbox"/> Michael L. Ridner, MD    |
| <input type="checkbox"/> Gordon H. Cash, MD      | <input type="checkbox"/> Sean P. Groark, MD                | <input type="checkbox"/> Joshua M. Krasnow, MD | <input type="checkbox"/> Christopher P. Roth, MD  |
| <input type="checkbox"/> Shi-Chi Cheng, MD       | <input type="checkbox"/> W. Herbert Haught, MD             | <input type="checkbox"/> Phillip L. Laney, MD  | <input type="checkbox"/> George M. Soliman, MD    |
| <input type="checkbox"/> Henry J. Chen, MD       | <input type="checkbox"/> Abdul Hritani, MD                 | <input type="checkbox"/> Navdeep K. Mann, MD   | <input type="checkbox"/> Mohammad Thawabi, MD     |
| <input type="checkbox"/> Sravya Chirumamilla, MD | <input type="checkbox"/> V. Ross Hunter, MD                | <input type="checkbox"/> James P. McGraw, MD   | <input type="checkbox"/> Alejandro Vasquez, MD    |
| <input type="checkbox"/> David H. Drenning, MD   | <input type="checkbox"/> Kaushik Jain, MD                  | <input type="checkbox"/> James Murphy, MD      | <input type="checkbox"/> Enrique M. Velasquez, MD |
|  |  |  | <input type="checkbox"/> Thomas W. Wright, MD     |

**VEIN CLINIC**

- |   |  |
|---|--|
| <input type="checkbox"/> <b>FIRST AVAILABLE</b> |  |
| <input type="checkbox"/> Rashida A. Abbas, MD   | <input type="checkbox"/> Michael L. Ridner, MD |

**STRUCTURAL HEART CLINIC**

- |   |   |  |  |
|---|---|--|--|
| <input type="checkbox"/> <b>FIRST AVAILABLE</b> |   |  |  |
| <input type="checkbox"/> Michael M. Butler, MD  | <input type="checkbox"/> Mihir Kanitkar, MD | <input type="checkbox"/> Alejandro Vasquez, MD | <input type="checkbox"/> P. Gautam Reddy, MD |

**PAD CLINIC (peripheral arterial disease)**

- |   |   |
|---|---|
| <input type="checkbox"/> <b>FIRST AVAILABLE</b> |   |
| <input type="checkbox"/> George M. Soliman, MD  | <input type="checkbox"/> Mohammad Thawabi, MD |

**ELECTROPHYSIOLOGY**

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> <b>FIRST AVAILABLE</b> |   |   |
| <input type="checkbox"/> J. Scott Allison, MD   | <input type="checkbox"/> Jay L. Dinerman, MD  | <input type="checkbox"/> John M. Jennings, MD |
| <input type="checkbox"/> Paul B. Tabereaux, MD  | <input type="checkbox"/> Michael Kaufmann, MD |   |

- |                     |  |   |  |   |
|---------------------|--|---|--|---|
| <b>Athens</b>       | <input type="checkbox"/> Crystal Walker, MD      |   |  |   |
| <b>Decatur</b>      | <input type="checkbox"/> Ashish K. Basu, MD      | <input type="checkbox"/> Peter A. Johnson, MD | <input type="checkbox"/> William D. Denney, MD | <input type="checkbox"/> Luis N. Villanueva, MD |
| <b>Madison</b>      | <input type="checkbox"/> Patricia B. Gurczak, MD | <input type="checkbox"/> James McGraw, MD     | <input type="checkbox"/> Joshua Valtos, MD     |   |
| <b>Boaz</b>         | <input type="checkbox"/> Kathleen Evans, DO      | <input type="checkbox"/> George Philip, MD    |  |   |
| <b>Sheffield</b>    | <input type="checkbox"/> Phillip Dean, MD        | <input type="checkbox"/> Randall Little, MD   | <input type="checkbox"/> Jerry B. Williams, MD |   |
| <b>Russellville</b> | <input type="checkbox"/> Phillip Dean, MD        |   |  |   |

**FOR OFFICE USE ONLY**

Appointment Made with \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_