



**INDIANAPOLIS**

Phone: 317-706-7246  
Fax: 317-706-3417  
8805 North Meridian St.  
Indianapolis, IN 46260

**GREENWOOD**

Phone: 317-706-7246  
Fax: 317-706-3417  
533 East County Line Rd.  
Greenwood, IN 46143

**LAFAYETTE**

Phone: 765-807-2780  
Fax: 317-706-3417  
3738 Landmark Dr.  
Lafayette, IN 47905

www.IndyPain.com

**PATIENT REFERRAL**

Please fax/mail this form along with recent office notes, medication list, all diagnostic reports, front and back of insurance card(s), and insurance referral.

**Workers' Compensation** (√ if applicable)  **Motor Vehicle Accident**

**DATE:** \_\_\_\_\_

**PATIENT INFORMATION**

Name: \_\_\_\_\_ DOB: \_\_\_\_\_  
Address: \_\_\_\_\_ Home #: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_ Work #: \_\_\_\_\_  
Insurance Carrier(s): \_\_\_\_\_ Mobile #: \_\_\_\_\_  
Diagnosis: \_\_\_\_\_

**REFERRING PHYSICIAN**

Provider Name: \_\_\_\_\_ Practice Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone #: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_ Fax #: \_\_\_\_\_  
NPI # \_\_\_\_\_ Office Staff Name: \_\_\_\_\_

**REQUEST:** \_\_\_\_\_

**INDIANAPOLIS**  
\_\_\_\_ Edward Kowlowitz, MD  
\_\_\_\_ John Fitzgerald, MD  
\_\_\_\_ Jocelyn Bush, MD  
\_\_\_\_ David Gordon, MD  
\_\_\_\_ First Available

**GREENWOOD**  
\_\_\_\_ Scott Kim, MD  
\_\_\_\_ Edward Kowlowitz, MD  
\_\_\_\_ David Gordon, MD  
\_\_\_\_ First Available

**LAFAYETTE**  
\_\_\_\_ David Miller, MD  
\_\_\_\_ First Available

Physicians are Board Certified by the American Board of Anesthesiology (ABA) with added qualifications in Pain Management

Comprehensive Evaluations    Nerve Blocks Injections    Spinal Cord Stimulators    Intrathecal Pumps  
Infusion Therapy    Physical Therapy    Psychological Services    Medication Management Regimens