

ICD-10: \_\_\_\_\_

Date: \_\_\_\_\_

Requesting Evaluation and Procedure for Date: \_\_\_\_\_

Patient Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Phone No.: \_\_\_\_\_

Address: \_\_\_\_\_

Skilled Nursing Facility:  Yes  No Nursing Facility Name: \_\_\_\_\_ Nursing Facility Phone: \_\_\_\_\_

Hospice Patient:  Yes  No Hospice Name: \_\_\_\_\_ Hospice Phone: \_\_\_\_\_

Person Authorizing Treatment: \_\_\_\_\_ Authorizing Signature: \_\_\_\_\_

Position: \_\_\_\_\_ Phone No.: \_\_\_\_\_ Fax No.: \_\_\_\_\_

**Fax with Demographics and insurance Information**

**Peripheral Arterial Disease**

- Lower Extremity Angio/ Peripheral Arterial Disease Evaluation/Peripheral Angio**
- Aneurysm – Iliac
- Aneurysm–Femoral/Popliteal Artery
- Atherosclerosis Extrem. w/ claud.
- Atherosclerosis Extrem w/ Rest Pain
- Atherosclerosis Extrem. w/ Ulcer
- Atherosclerosis Extrem. w/Gangrene
- Embol. &Thrombosis Abd. Aorta
- Lower Extremity Embolism/Occlusion
- Upper Extremity Embolism/Occlusion
- Embolism & Thrombosis of Iliac
- Bruit
- Hematoma – Due to Surgery
- Numbness
- Pain in Limb
- Weak Pulse
- Other: \_\_\_\_\_

**Venous Disease Lower Extremity**

- Consult & Ultrasound Same Day
- Consultation Only
- Ultrasound Varicose/Spider/Venous Ulcer
- Ultrasound - DVT (Deep Vein Thrombosis)
- Cellulitis of Leg
- Chest Pain
- Deep Vein Thrombosis
- Dialysis Access Planning
- Focal Superf Swelling, Mass or Lump
- Pain in Limb
- Phlebitis and Thrombophlebitis
- Pulmonary Embolism
- Pre-operative Exam
- Shortness of Breath
- Swelling of Limb
- Ulcer-Lower Extremity
- Varicose Vein of LE with Inflammation
- Varicose Veins LE with Ulcer
- Varicose Vein with Complications
- Venous Insufficiency, Unspecified
- Other: \_\_\_\_\_

**Chemo Port/Plasmapheresis Catheter**

- Arm Port Placement - Left
- Arm Port Placement - Right
- Chest Port Placement - Left
- Chest Port Placement - Right
- Port Check
- Port Removal
- Tunneled Catheter Removal
- Other: \_\_\_\_\_

**Women's Services**

- Uterine Fibroid Embolization
- Pelvic Congestion Syndrome
- Ovarian Vein/Varicoele Embolization
- Other: \_\_\_\_\_

**IVC Filter**

- IVC Filter Placement
- IVC Filter Removal
- Other: \_\_\_\_\_

**Additional Atlanta Area Locations:**

**Northwest Atlanta Vascular Care**  
 711 Canton Road NE, Suite 220  
 Marietta, GA 30060  
 P: 404.554.2196  
 F: 404.554.2415

**Southwest Atlanta Vascular Care**  
 3885 Princeton Lakes Way SW, Suite 314  
 Atlanta, GA 30331  
 P: 404.349.7770  
 F: 404.349.7778

**Southeast Atlanta Vascular Care**  
 5461 Hillandale Drive, Suite 210  
 Lithonia, GA 30058  
 P: 770.981.8477  
 F: 770.981.8908