



Lifespan Physician Group, Inc.
 Obstetrics & Gynecology
Delivering health with care.®

Pelvic Pain Program

148 West River St.
 Providence, RI 02904
1st Floor – Suite 8
 Phone: 401 606-3000
 Fax: 401 331-8110

Back Line for Physician Office Use
 401-606-4172

REFERRAL FORM

PATIENT _____ DOB ____/____/____

ADDRESS _____

PHONE Home _____ Cell _____ Work _____

May we leave a message stating the call is from “Lifespan Physician Group-Obstetrics & Gynecology” or “Dr. X’s office”?

Yes No

PRIMARY INSURANCE _____ ID# _____

SECONDARY INSURANCE _____ ID# _____

REFERRING PROVIDER _____ PHONE _____

FAX _____

Translator needed? No Yes - Preferred Language: _____

Fax with any pertinent records and lab/test results to: 401-331-8110

Thank you.

Please indicate:

Suspected nerve entrapment within the first 6 weeks following surgery

The patient is 18 years or younger

Services requested: Please select what you would like for your patient:

One-time consultation with recommendations back to referring provider

Co-management of the patient

*Referring provider continues GYN care. Dr. Fox/Dr. Clark Donat provide pelvic pain care.

Dr. Fox will provide pelvic pain care and Patient needs a referral to a GYN as well

REASON FOR REFERRAL _____

Currently receiving treatment? No Yes - _____

Please Note: The doctor will not prescribe any controlled substances at the initial evaluation. She is happy to take over the prescription of opioid medication in women who are interested in weaning off of their pain medication. This will be set up during the first few visits to allow a smooth transition of care.

Please contact us with questions at any time. (401) 606-3000