



Patient Referral

<p align="center"><b><u>Superior Patient Outcomes</u></b></p> <p><b>96%</b> Hospital Admits &amp; ER Visit Reductions  <b>95%</b> Neuropathy patients improved  <b>76%</b> Improved at least one complication  <b>24%</b> Maintained status (did not get worse)  <b>63%</b> HbA1c reduction  <b>41%</b> Reduced medications</p>	<p align="center"><b><u>Patient Information</u></b></p> <p>Name: _____          Phone #: _____          DOB: _____          Gender:        Male        Female</p>
<p align="center"><b><u>Check Those That Apply</u></b></p> <p>Neuropathy          Retinopathy          Nephropathy          Low Energy          Weight Problems          Erectile Dysfunction          High/Low Blood Sugar          Wounds          Possible Amputations          Mood Swings          Sleep Problems          Hair, Nail or Skin Problems          Dementia          Alzheimer's          Possible Stroke          Fatty Liver</p> <p>Most Recent HbA1c: _____          Date: _____</p>	<p align="center"><b><u>Referring Doctor Information</u></b></p> <p>Name: _____          Phone #: _____          Fax #: _____</p> <p align="center"><b><u>Provider Information</u></b></p> <p align="center">Courtney Hayes, FNP-C          Stephanie Chadwick, FNP-C</p> <p align="center">3345 US HWY. 84 West, #102          Blackshear, GA 31516</p> <p align="center">Phone: (912)208-3581          Fax: (912)807-1028</p>
<p align="center"><b><u>Services Offered</u></b></p> <p align="center">Metabolism Optimization          Hormone Optimization          Weight Management          Wellness &amp; Nutrition</p>	<p align="center"><b><u>How did this Patient hear about us?</u></b></p> <p>This Referral          Friend or Family          Broadcast Media          Print Media          Social Media          Other: _____</p>

Provider Signature:

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

Patient Signature:

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