MID-HUDSON RETINA CONSULTANTS

www.midhudsonretina.com

Glenn J Green MD
Larry Koreen, M.D., Ph.D., M.P.H

REFERRAL FORM

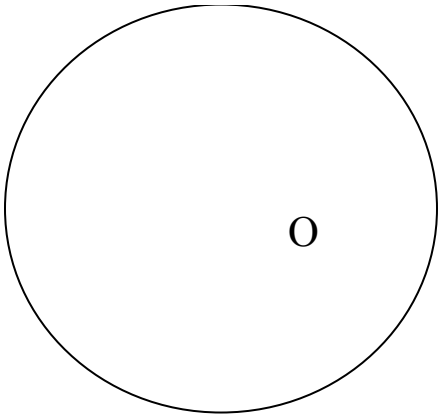
DIRECTIONS: Please fax: Newburgh 845-562-1162 Middletown 845-692-7214
Or
Give to the patient to bring to the appointment

Referring Doctor:_____
Patient Name:_____ Age ____ Date of Birth_____
Telephone Contact Number_____
Date of Appointment_____
Office: □ Newburgh □ Middletown □Dr. Green □Dr. Koreen

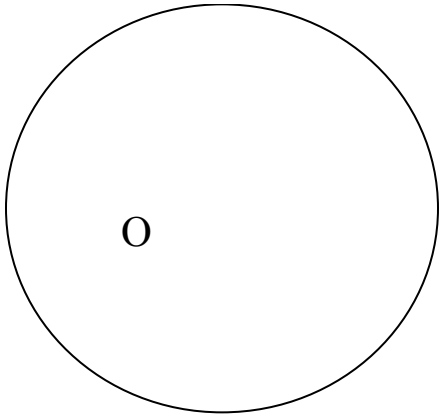
Reason for Consult: OD OS OU

□ Diabetic Retinopathy
□ Macular Degeneration
□ Macular Edema
□ Flashes and Floaters
□ Retinal Tear
□ Retinal Detachment
□ Central Retinal Vein Occlusion
□ Branch Retinal Vein Occlusion
□ Maculopathy
□ Choroidal Nevus/ Melanoma/Mass
□ Uveitis
□ Unexplained Visual Loss
□Other: Please specify _____

OD



OS



Comments:_____
_____

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