Ohio ENT & Allergy Physicians

ENT Referral

☐ Patient will need an interpreter

Language needed _____

Please fax completed form to (614) 233-2354

For urgent / same day appointments, please call Central Scheduling at:

(614) 273-2230

Patient Name: _____ **D.O.B.**_____

Best Phone Number To Reach Patient: _____

Appointment To Be Scheduled (*select all that apply*):

☐ Medical Consult	☐ Audiological Evaluation
☐ Medical Consult with Audiological Evaluation	☐ Vestibular Evaluation-ENG/VNG
☐ Medical Consult with Vestibular Evaluation-ENG/VNG	☐ Voice Evaluation
☐ Medical Consult with Voice Evaluation	☐ VLS (Videolaryngostroboscopy)
☐ Medical Consult with VLS (Videolaryngostroboscopy)	☐ Fiberoptic Endoscopic Examination of Swallowing (FEES)

Chief Complaints / Signs / Symptoms:

_____

_____

_____

Referring Physician:_____ **Phone:** _____

Signature: _____ **Fax:** _____

Request A Physician

☐ Jenna Barengo, MD	☐ Steven M. Hirsch, MD	☐ Cherie Ryoo, MD
☐ Patrick L. Bockenstedt, MD	☐ Rohan Khandalavala, MD	☐ Ashish R. Shah, MD
☐ J. Paul Burkhart, DO	☐ Scott Kramer, MD	☐ Adam C. Spiess, MD
☐ Eugene Chio, MD	☐ Michael J. Loochtan, MD	☐ David Straka, MD
☐ Alfred J. Fleming, MD	☐ James D. Lowery, MD	☐ Evan J. Tobin, MD
☐ Akash Gupta, MD	☐ Michael D. Martyn, MD	☐ Andrew J. Tompkins, MD, MBA
☐ Jeffrey A. Hall, MD	☐ Blaize A. O'Brien, MD	
☐ Joseph E. Hall, MD	☐ David M. Powell, MD	

OR Request A Location

☐ 974 Bethel Rd., Ste. A Columbus, OH 43214	☐ 801 OhioHealth Blvd., Ste. 220 Delaware, OH 43015	☐ *(pediatric ENT only)* 1671 W. Main St. Newark, Ohio 43055
☐ 6573 E. Broad St. Columbus, OH 43213	☐ 6670 Perimeter Dr., Ste. 120 Dublin, OH 43016	☐ 477 Cooper Rd., Ste. 480 Westerville, OH 43081
	☐ 2526 London Groveport Rd. Grove City, OH 43123	

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