



**Texas Orthopedics**  
www.txortho.com

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**PHYSICIAN LINE**

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**Marble Falls**  
1701 US Hwy 281  
Marble Falls, Texas 78654  
(512) 439-1000 • FAX (512) 439-1019

**REFERRAL FORM**

**\*FOR URGENT SCHEDULING, CALL 439-1070.**

**Attach Demographics / Insurance Sheets**

**Patient Name:** \_\_\_\_\_ **DOB:** \_\_\_\_\_ **Telephone #:** \_\_\_\_\_

**Patient History / Diagnosis:** \_\_\_\_\_

**Referring Physician's Name:** \_\_\_\_\_

**Physician Referring To:** \_\_\_\_\_

**Reason for Referral:**

**Consult** \_\_\_\_\_

**EMG / NCV** \_\_\_\_\_

**ESI / FACET INJ.** \_\_\_\_\_

**Bone Densitometry**

**MRI**

Cervical Spine

Shoulder

L

R

Thoracic Spine

Elbow

L

R

Lumbar Spine

Wrist

L

R

Soft Tissue Neck

Hip

L

R

Other \_\_\_\_\_

Knee

L

R

\_\_\_\_\_

Ankle

L

R

MR Arthrogram

Special View(s) \_\_\_\_\_

**\*\*\*FAX REFERRALS TO 439-1085\*\*\***

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