

Patient Name _____

Date of Birth _____ Phone _____

Insurance _____

Please fill out or attach demographics sheet.

Additional Information:

Evaluate and Treat

I certify by signature that the following treatment is medically necessary.

Dx _____

Surgery _____

Treatment _____

Frequency _____

Duration _____

Physician Signature

Date

Physician Name (Print)

Alabaster/Pelham

3569 Pelham Pkwy,
Suite 7
Pelham, AL 35124
P: (205) 664-8404
F: (205) 664-8559

Andalusia

1811 Western Bypass
Suite B
Andalusia, AL 36420
P: (334) 222-2620
F: (334) 222-2623

Auburn

1530 East Glenn Ave,
Suite C
Auburn, AL 36830
P: (334) 502-7839
F: (334) 502-7879

Chelsea

100 Chelsea Corners Way,
Suite 100
Chelsea, AL 35043
P: (205) 678-7272
F: (205) 678-7279

Crestline

205 Country Club Park
Birmingham, AL 35213
P: (205) 871-0777
F: (205) 871-0701

Florence

3226 Florence Blvd
Florence, AL 35634
P: (256) 275-3312
F: (256) 367-4122

Fultondale

3471 Lowery Pkwy,
Suite 107
Fultondale, AL 35068
P: (205) 849-6566
F: (205) 849-6563

Greystone

2823 Greystone
Commercial Blvd.
Birmingham, AL 35242
(205) 408-1713
fax: (205) 408-1170

Homewood

1280 Columbiana Road,
Suite 160
Homewood, AL 35216
P: (205) 968-1283
F: (205) 968-1285

Huntsville - Airport Rd.

964 Airport Road,
Suite 10
Huntsville, AL 35802
P: (256) 285-4250
F: (256) 285-4255

Huntsville

6485 University Dr. NW,
Suite C
Huntsville, AL 35806
P: (256) 513-8280
F: (256) 513-8286

Jasper

200 N. Airport Road,
Suite 110
Jasper, AL 35504
P: (205) 387-3266
F: (205) 387-3267

Lakeview/Forest Park

720 32nd Street South
Birmingham, AL 35233
P: (205) 731-2177
F: (205) 731-2519

Montgomery

8117 Old Federal Road
Montgomery, AL 36117
P: (334) 380-5920
F: (334) 380-5921

Opelika

2701 Frederick Road,
Suite 310
Opelika, AL 36801
P: (334) 610-0354
F: (334) 610-0355

Pell City

85 Plaza Drive
Pell City, AL 35125
P: (205) 338-6106
F: (205) 814-9180