



JAGANNATHAN NEUROSURGERY

Please circle a provider or select:

First Available

Neurosurgery:

Dr. Jay Jagannathan, MD

(Troy, Bay City, West Branch, Sault Ste. Marie)

Dr. M. Adam Kremer, MD

(Bay City and Mount Pleasant)

Pain Management:

Dr. Sam Morkos MD

(West Branch & Bay City)

Dr. Richard Burke MD

(West Branch)

Dr. Ju Gao, MD

(Troy)

EMG:

Dr. Derek Lado, DO

(West Branch and Bay City)

Troy:
3290 W. Big Beaver Rd, Ste 150
Troy, MI 48084
P: (248) 792-6527
F: (248) 79209106

Bay City:
4 Columbus Ave Suite 260
Bay City, MI 48708
P: (989) 308-1840
F: (989) 391-4170

Mount Pleasant:
1621 E Broomfield St
Mount Pleasant, MI 48858
P: (989) 308-1840
F: (989) 391-4170

West Branch:
2333 Progress St
West Branch, MI 48661
P: (989) 701-2538
F: (989) 701-2540

Sault Ste Marie:
309 West 12th Ave, Ste 102
Sault Ste Marie, MI 49783
P: (989) 701-2538
F: (989) 701-2540

New Patient Referral Form

Please Note: When referring patients, please send MRI of the problem area (within a year), most recent office notes, and patient demographics with insurance information. **If patient cannot have an MRI due to metal in the body or a pacemaker, please order a CT Myelogram instead.**

Patient Information:

Name: _____ Todays Date: _____

Date of Birth: _____ Home Phone: _____

Insurance: _____ Reason for Referral: _____

Referring Office Information:

Physician/NP/PA: _____ PCP: _____

Phone: _____ Fax: _____

Chief Complaint/Diagnosis: _____

Please include office notes, operative summaries, physical therapy notes and diagnostic testing for review.

Previous Pain Management? _____

Physical Therapy? (When & Where; please send notes if have): _____

EMG/NCS Order(s):

Bilateral Limbs	Right Limb	Left Limb
[] Upper extremities	[] Upper extremity	[] Upper extremity
[] Lower extremities	[] Lower extremity	[] Lower extremity

Thank You for Your Referral!