

**Consultation Request Form**

This form is provided for the convenience of our referring doctor's offices so that important demographic and clinical information will be available at the time of your patient's consultation visit with Dr. Klapper.

If your staff would prefer, please contact our office by telephone **317.818.1000**

**\*Please fax your last office visit note and copies of your patient's insurance/Medicare card\***

**Referring Doctor:** \_\_\_\_\_ M.D./O.D./D.O. NPI \_\_\_\_\_

**Doctor's Office Telephone #** (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ **Fax #** (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

**PATIENT'S NAME:** \_\_\_\_\_ **D.O.B.** \_\_\_\_/\_\_\_\_/\_\_\_\_

**Mobile:** (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ **Email address:** \_\_\_\_\_  
**Work:** (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ (email required to provide patient portal  
Login to preregister)

**Insurance/Medicare:** \_\_\_\_\_ **ID#:** \_\_\_\_\_ **Group#:** \_\_\_\_\_

**Clinical Info**

**Visual Acuity:** Right - 20/\_\_\_\_ Left - 20/\_\_\_\_ **Affected area:** \_\_\_\_\_

**Diagnosis/Reason for Consultation:**

(please check all that may apply)

- Anophthalmos    Blepharospasm    Blind, painful eye    Chalazion/Stye
- Cosmetic Consult    Dermatochalasis/Blepharoplasty    Ectropion    Entropion
- Orbital Fracture    Ptosis    Tearing (Epiphora)    Thyroid Eye Disease
- Eyelid/Face Lesion    Skin Cancer (circle type if known) BCCA/SCCA/Sebaceous cell/Melanoma

**Other, Please Describe:** \_\_\_\_\_

**Would you like our office to contact the patient to schedule?** Yes  No

[If your patient needs to be evaluated prior to the next available appointment, please call our office.]

**If appointment confirmed by phone – date:** \_\_\_\_/\_\_\_\_/201\_\_ **time:** \_\_\_\_:\_\_\_\_ AM PM

**Office Location:**

- North Indy - 11590 N. Meridian St. Suite 100, Carmel (Meridian Crossing)
- South Indy - 5255 E. Stop 11 Rd. #410 (St. Francis Hospital Indianapolis)
- Columbus - 3135 Middle Road (Pankratz Eye Institute)

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\*New Patients should be encouraged to access our secure, personalized Patient Portal to Preregister prior to their consultation with Dr. Klapper\*

(Visit [www.klapperplasticsurgery.com](http://www.klapperplasticsurgery.com) for links to Preregistration, Google Maps to our offices, our Photo Gallery, and other Patient Resources)