



Friedrich Eye Associates, PLLC

One Northgate Park Plaza, 2120 Northgate Park Lane, Suite 102, Chattanooga, TN 37415
Phone: (423) 702-2020 Fax: (423) 702-2021

REFERRAL FORM

DATE: _____

REFERRING PHYSICIAN'S NAME: _____

REFERRING PHYSICIAN'S PHONE: _____ FAX: _____

PATIENT'S NAME: _____ DOB: _____

PHONE NUMBER: _____ ADDITIONAL NUMBER: _____

REFERRAL TO: _____ DAVID L. FRIEDRICH, MD
_____ DENNIS L. COSGROVE, OD
_____ FIRST AVAILABLE

REASON FOR REFERRAL:

| | |
|-------------------------------------|--------------------------|
| _____ CATARACT EVALUATION | _____ DRY EYES |
| _____ DIABETES SCREENING/ EYE EXAM | _____ EYE LESION |
| _____ ROUTINE DILATED EYE EXAM | _____ FLASHES/FLOATERS |
| _____ GLAUCOMA | _____ IRITIS/INFLAMATION |
| _____ REDNESS IN EYE OR AROUND EYES | _____ MACULAR DEGEN. |
| _____ FOREIGN BODY IN EYE | _____ STYE/CHALAZION |
| _____ OTHER: _____ | |

Inner office use:

Appointment Date: _____ Time: _____ am pm with _____ Dr. Friedrich _____ Dr. Cosgrove

Patient Notified via _____ Phone _____ Letter _____ E-mail _____

Appointment Scheduled by FEA Employee: _____

Thank you for trusting us in the care of your patient's vision and eye needs!