



Challapalli Cardiology
 5375 Reno Corporate Drive
 Reno, NV 89511
 Phone: 775.384.1134
 Fax: 775.284.1523

Thank you for choosing Challapalli Cardiology for your patient’s cardiology referral or procedure. Please complete this form and fax it directly to 775.284.1523 for scheduling.

Please attached the following documentation required to start the scheduling process:

- ___ Patient Demographics
- ___ Printed history and physical
- ___ Complete Medication List
- ___ Copy of both sides of the Insurance Card(s)

For scheduling questions, please call us at 775.384.1134.

Date:	From:
No. of pages:	Title:
To: Challapalli Cardiology scheduling	Phone:
Fax: 775.284.1523	Fax:

Patient Information:

Name of Patient:	DOB:
Home Phone:	Cell:
Parent or caregiver (if applicable):	
Address:	
City:	State: Zip:
Primary Insurance:	
Secondary Insurance:	

Procedure Information:

Diagnosis/ICD-9/10:
Requested Procedure:
<input type="checkbox"/> Cardiac PET Scan <input type="checkbox"/> Echo