



Date: _____

Neurology/Neurosurgery Consultation Request

Reason for Request: _____

Please check the facility/service you are requesting

INI Neurology – Randolph Building

Ph: 309-624-8500 • Fax: 309-624-8544

- General Neurology
- Multiple Sclerosis
- Neuromuscular/MDA
- NeuroRehabilitation

INI Neurosurgery

719 N Wm Kumpf Blvd, #100

Ph: 309-676-0766 • Fax: 309-676-5920

- Neurosurgery

INI Gamma Knife Clinic

OSF Saint Francis Medical Center

Forest Park Building

Ph: 309-655-7104 • Fax: 309-624-3526

INI Neuro-Diagnostic Center

6th floor –OSF Saint Francis Medical Center

- INI Sleep Center
Ph: 309-624-9960 • Fax: 309-655-6967
- INI Neuro-Ophthalmology
Ph: 309-655-2164 • Fax: 309 655-2040
- INI Neuro-Vestibular Clinic
Ph: 309-655-2630 • Fax: 309- 655-2603
- INI Epilepsy Center
Ph: 309-624-8750 • Fax: 309-624-8967
- INI Stroke Center
Ph: 309-624-6267 • Fax: 309-624-8967
- INI Carotid Clinic
Ph: 309-624-6267 • Fax: 309-624-8967

Patient Name: _____ DOB: _____

Address: _____ City: _____ Zip: _____

Phone: Home () _____ Cell () _____ Work () _____

Primary Insurance: _____ ID : _____

Has insurance authorization been received? Yes _____ No _____ Authorization # _____

Is this a Worker’s Compensation Case? Yes _____ No _____

Referring Physician: (First/Last Name) _____

Address _____ City _____ Zip _____

Contact Person: _____ Phone () _____ Fax () _____

Primary Care Physician: _____

Requesting Provider Signature: _____

Please fax the following with this consultation request to the appropriate clinic:

- Any office notes pertaining to the problem and a pertinent summary/problem list
- Current medication list, including OTC and herbal medications
- List of allergies
- Copy of patient insurance card
- Any lab, pertinent x-ray, CT, MRI, EEG, EMG/NCV, Doppler and CT-myelogram reports
- Send CD if available or have radiographic films or discs sent to the appropriate clinic

Please circle the type of testing completed and the facility where it was performed

X-ray CT MRI EEG EMG/NCV CT-Myelogram Doppler studies Angiogram

OSF Methodist Proctor Great Plains Peoria Imaging Other _____