

# Infectious Disease Consultants, PA

James S. Ley, MD • Wesley W. Emmons, III, MD  
Chad Duffalo, MD, MPH • T. Reena Mascarenhas, MD • Renaldo Neeley, MD

Apex Medical Center, Suite 201  
537 Stanton Christiana Road  
Newark, DE 19713

tel: (302) 994-9692

fax: (302) 994-9803

Date faxed: \_\_\_\_\_

Fax #: \_\_\_\_\_

## New Patient Referral

Patient Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Reason for Consultation: \_\_\_\_\_

Referring Physician: \_\_\_\_\_

Please fax the following documents to our office so that we may provide the best patient care.

### Documents Needed:

1. Patient Demographics
2. Diagnosis of Infection
3. Most recent office notes
4. **Recent Labs and/or cultures**
5. Pertinent tests (ie: CT, ultrasounds, MRI, etc.)
6. Other: \_\_\_\_\_  
\_\_\_\_\_

Timely receipt of these documents will expedite the scheduling process for your patient.

We appreciate your referral and will make every effort to address your patient's health concern. Please do not hesitate to contact us with any questions or concerns.

### NOTICE

The information contained in this facsimile is private and confidential information and intended only for the use of the recipient named above. The authorized recipient is prohibited from disclosing this information to any other party unless required to do so by law or regulation and is required to destroy the information after its stated need has been fulfilled. If you, the reader, are not the intended recipient, you are hereby notified that any dissemination, distribution, duplication, or action taken in reliance on the contents of any part of this communication is strictly prohibited. If you have received this communication in error, please destroy this information and notify the sender at the e-mail address, telephone number or fax number listed above. Unauthorized access to confidential information is subject to federal and state laws and could result in personal liability, fines, and imprisonment.