

Please fill out the form **COMPLETELY** and **LEGIBLY** to ensure efficient scheduling. Attach all pertinent records, including insurance cards, and fax them to (256) 535-9032. We will contact your patient and schedule the appointment. Per NALENT policy, we must have **INSURANCE AUTHORIZATIONS** before scheduling.

Referring Provider: _____ NPI#: _____

Phone: _____ Fax: _____

Reason for Referral: _____ (NO ICD CODES PLEASE)

Preferred Location: ☐ **Huntsville Office**
 1963 Memorial Parkway SW, Suite 5
 Huntsville, AL 35801

☐ **Madison Office**
 8337 Hwy. 72 W, Suite 301
 Madison, AL 35758

Preferred Provider (Leave blank for no preference): _____

- | | | |
|--|--|---|
| ☐ Jasper Castillo, M.D.
Pediatric Otolaryngology | ☐ Nicholas Rivers, M.D.
General ENT: Adult/Peds | ☐ Alexander Williams, PA-C
Physician Assistant |
| ☐ Forest Weir, M.D.
Head & Neck Cancer | ☐ William McFeely, M.D.
Otology/Neurology: Hearing Loss,
Tinnitus, Dizziness and Balance
Problems, Other Ear Problems | ☐ Kyra Robinson, PA-C
Physician Assistant |
| ☐ Bradley Hobbs, M.D.
General ENT: Adult/Peds | ☐ Dr. Samih Nassif Abudinen, M.D.
Head & Neck Cancer, Thyroid and
Parathyroid Problems | ☐ Jennifer Avans, FNP-C
Nurse Practitioner |
| ☐ John Kostrzewa, M.D.
General ENT: Adult/Peds | ☐ Scott McCary, M.D., FACS
General ENT: Adult/Peds | ☐ Hannah Denton, CRNP
Nurse Practitioner |
| ☐ Ken Teachey, M.D.
Head & Neck Cancer, Thyroid
and Parathyroid Problems | ☐ Katie Robinson, PA-C
Physician Assistant | ☐ Reece S. Weaver, NP
Nurse Practitioner |
| ☐ Michael McFadden, M.D.
General ENT: Adult/Peds | | |

NALENT IS NO LONGER A PROVIDER FOR: AARP® ADVANTAGE, AMBETTER, BLUECARE/TENNCARE, CIGNA HEALTHSPRINGS, CIGNA MEDICARE, CIGNA TOTAL CARE, GEHA, MEDICAID—OUT OF MADISON COUNTY, STUDENT HEALTH POLICIES, TRICARE, TRIWEST, UHC, UHC MEDICARE ADVANTAGE HMO, VA AND WELLCARE.

Patient Information:

First Name:	Last Name:	MI:
Address:		Zip Code:
Phone:	Alt. Phone:	Sex:
SS#:	DOB:	
Primary Insurance:	Contract #:	Group #:
Secondary Insurance:	Contract #:	Group #:
If the patient has additional insurance, please include it in the records with the name and DOB of the policyholder.		

If you have any questions, please call us at (256) 536-9300.

HUNTSVILLE
 1963 Memorial Parkway SW, Suite 5
 Huntsville, AL 35801

MADISON
 8337 Hwy. 72 W, Suite 301
 Madison, AL 35758