



1185 Town Center Drive, Suite 125  
Eagan, MN 55123

**Scheduling:**  
(T) 651.454.7224  
(F) 651.454.7355

## Patient Referral Form

Date:

Place Patient Label Here

## Consultation & Management of Vein Disease

### Patient Information

Patient Name	Gender	Date of Birth	ID/MRN
Address			Home Phone
City	State	Zip	Work/Other Phone
Indications/Symptoms			
Previous Vein Treatments			

### Physician Information

Referring Physician	Office #	Fax #
Referral Coordinator	Practice Name / Clinic Location	
Special Instructions		

### Appointment Information & Map

#### Please indicate appointment preference:

- ☐ First Available
- ☐ Patient will call to schedule
- ☐ Clinic will call to schedule
- ☐ No Preference

#### Please indicate Physician preference:

- ☐ Dr. Timothy Goertzen
- ☐ Dr. Micheal Rosenberg
- ☐ Dr. George Edmonson
- ☐ Dr. Richard Aizpuru
- ☐ No Preference

