Texas Physician House Calls

Sumana Ketha M.D.

To:

Board certified in Internal Medicine

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Referral source F.F. Concretore Home Houth Date: 44916
Agent Cording N. Phone: 24 809 044 Fax: 072 804-6632
Home Health Agency: E.E. Cornerotions
Patient Information Home Health INC
Patient (Last name): Burton (First Name): Annie (Middle Initial)
D.O.B.1 1366 SSN: M F Phone: (469) 515-4009
Address: 2226 Kathken Ave. City: Dalbo Zip: 76216
Race: Language: Spanish (English) Other:
Alternate
Contact:Relationship:Phone:()
Patient Email Address:
Medical Reason for referral: Evaluation for Home Health
Patient diagnosis: Science Doordor, COPD, Hyportonsion
s Patient Homebound? YES/NO Needs Home Health: VZS/NO
How soon does the patient need to be seen?
INSURANCE INFORMATION:
Primary insurance:
Medicare #: Medicaid # <u>52099196</u>
Secondary:Policy/Group # : Effective date:
Copies of Medicare and insurance cards
Referral signature: Cavaire Nwoodskwoate: 4/a/15

Referral Fax line (972) 675 7310 Main: (972) 675 7313 ext 105

All inquiries will be responded in 24 hours during work days, For all electronic inquiries please send secure email to hhsupport@texashousecalls.com. Thank you for your referral.

You can also complete the Referral form online at http://www.texashousecalls.com/request-a-housecall/