



**Dr. Lam D. Nguyen, D.O.**  
**Dr. Kenneth C. Reed, M.D.**

P: (918) 901-9701  
F: (918) 901-9702  
9320 S. Mingo Rd. Tulsa, OK 74133

**Please Include with Your Referral:**

- Recent Office Notes
- Medication List
- Insurance Referral
- Front/Back of Insurance Card(s)
- All Imaging
- All Diagnostic Reports

**Please Fax Referrals to (918) 901-9702**

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

Social Security Number: \_\_\_\_\_

Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Insurance Carrier(s): \_\_\_\_\_

Diagnosis or Presenting Problem: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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

**Service Requested:**

- Consult & Management
- Consult Only
- Procedure Only (specify)

**Physician Requested:**

- First Available
- Lam Nguyen, DO
- Kenneth Reed, MD

Please provide the following information ONLY if this is your first time referring to our office.

Practice Name: \_\_\_\_\_

Tax ID (EIN)#: \_\_\_\_\_

NPI#: \_\_\_\_\_

Medicaid Provider#: \_\_\_\_\_