



CENTRAL VALLEY WOMEN'S HEALTH ASSOCIATES

1374 E. Alluvial Ave. | Fresno, CA 93720
7355 N. Palm Ave., Suite 105 | Fresno, CA 93711
T: 559-981-2600 | F: 559-981-2610

PATIENT REFERRAL

First Available Physician Next Available Urgent Emergent
 Dr. Kelleen Bosch
 Dr. Adanna Ikedilo OB GYN
 Dr. Stewart Mason

Referring Physician: _____

Phone: _____ Fax: _____

Contact Person: _____

Patient's Name: _____ SS# _____

Reason for Referral: _____

Insurance: _____ # _____

Please send copies of patient demographic sheet (address, phone number, insurance), insurance cards (front & back), referral, any medical records pertinent to diagnosis that should include any lab work, x-rays, pap results, U/S and progress notes.

Procedures and appointments will be scheduled after all necessary information is received. After appointment is scheduled the date and time will be FAXED back to you.

Thank You,
Scheduling Coordinator
Telephone 559-981-2600

The above patient has been scheduled for _____

On _____ at _____