

**OhioHealth Physician Group
NEUROSURGERY**
Patient information:

Patient Name _____ Date _____

Address _____ City _____ State _____ Zip code _____

Main Phone # _____ Alternate phone # _____

Social Security Number _____ Birth Date _____

☐ Male ☐ Female Language _____ Interpreter ☐ Yes ☐ No Special needs _____

Referring Physician information:

Physician's Printed Name _____ Physician Signature _____

Office Phone # _____ Fax # _____ Form completed by _____

Reason for Referral _____

Diagnosis Code _____ **If BWC – Allowed Diagnosis Code** _____

☐ Evaluate and Treat ☐ Consultation ☐ 2nd opinion/Consult ☐ Routine ☐ Urgent

Insurance Information: SEND COPY OF INSURANCE CARD (FRONT AND BACK) AND ANY RELATED PATIENT RECORDS / REPORTS

Insurance Company _____ Referral / Authorization/ Claim # _____ Self Pay ☐

Prefer 1st physician available? ☐ Yes ☐ No ☐ Notify patient of appointment ☐ Notify Physician office of appointment

Fax: (614) 533-0103 Phone: (614) 533-5500

Neurosurgery

Victor Awuor MD	☐ Grant	☐ Pickerington	☐ Westerville
Rebecca Brightman MD	☐ Riverside 1		
Ward Buster DO	☐ Nelsonville	☐ Riverside 1	
Alok Chaudhari MD	☐ Doctors		
Bohdan Chopko PhD MD	☐ Mansfield		
Ronald Dorbish DO	☐ Riverside 1		
Patrick Flannagan MD	☐ Pickerington 1	☐ Chillicothe	☐ Grove City
J. Brett Fleming MD	☐ Riverside 1	☐ Delaware	☐ New Albany
Vadim Fuchs DO	☐ Riverside 1	☐ New Albany	
Robert Gewirtz MD	☐ New Albany	☐ Pickerington 1	
Christa Ghinda MD	☐ Mansfield		
Girish Hiremath MD	☐ Riverside 1	☐ New Albany	
Andrew Look MD	☐ Riverside 1		
Alex Lu MD	☐ Riverside 1		
Bradford Mullin MD	☐ Pickerington 1		
Kailash Narayan MD	☐ Grant		
Ajay Patel MD	☐ Riverside 1		
Brian Seaman DO	☐ Riverside 1	☐ New Albany	
Christopher Taylor MD	☐ Riverside 1		
Xavier Gaudin DO	☐ Grant		
Zoe Zhang MD	☐ Lancaster	☐ Mansfield	☐ Pickerington 1

Fax: (614) 533-0214 Phone: (614) 788-4581

Gregory Balturshot MD ☐ Riverside 1 ☐ Portsmouth ☐ Springfield

Fax: (614) 533-0229 Phone: (614) 788-4582

Christian Bonasso MD	☐ Riverside 1	☐ Circleville
	☐ Marietta	☐ Marion
	☐ Upper Sandusky	☐ Marysville

Circleville – 600 N. Pickaway St, Suite 107 Circleville 43113

Chillicothe – 869 North Bridge St, Chillicothe 45601

Delaware – 801 OhioHealth Blvd, Suite 210 Delaware 43015

Doctors – 5131 Beacon Hill Rd, Suite 110-C Columbus 43228

Dublin – 6905 Hospital Drive Dublin 43016

Grant – 285 E. State St, Suite 430 Columbus 43215

Grove City – 2030 Stringtown Rd, Suite 120 Grove City OH 43123

Lancaster – 1638 Memorial Dr Lancaster 43130

Mansfield - 335 Glessner Ave, 2nd Flr Mansfield 44903

Marietta – 1204 Greene St Marietta 45750

Marion – 1069 Delaware Ave, Suite 205B Marion 43302

Marysville – 171 Morey Dr, Suite C Marysville 43040

McConnell HHC – 3773 Olentangy River Rd Columbus 43214

Nelsonville – 11 John Lloyd Evans Memorial Pkwy Nelsonville 45764

New Albany - 5150 E. Dublin-Granville Road Columbus 43081

Pickerington – 1030 Refugee Rd, Suite 280 Pickerington 43147

Portsmouth – 1711 27th St, Suite 103B Portsmouth 45662

Riverside 1 – 3555 Olentangy River Rd, Suite 2001 Columbus 43214

Riverside 2 – 3525 Olentangy River Rd, Suite 5310 Columbus 43214

Upper Sandusky – 885 N. Sandusky Ave Upper Sandusky 43351

Springfield – 7774 Dayton Springfield Rd Fairborn 45324

Westerville – 300 Polaris Pkwy, Suite 210 Westerville 43082

Please send related patient records/reports and insurance information with referral to prevent any delays in review/scheduling
ONP Use only: Appointment Date: _____ Time: _____ Physician: _____ Initials: _____

☐ Patient declined appointment ☐ Unable to contact patient