



VASCULAR &
INTERVENTIONAL
SPECIALISTS

345 W. STEAMBOAT DR., SUITE 601
Dakota Dunes, SD 57049
Phone: (605) 217-5617 Fax: (605) 217-5533

PLEASE CIRCLE: ASAP First Available

Patient Name:		Date of Birth:	
Address:			
Home phone:	Work Phone:	Cell Phone:	
Insurance: (Please send copy of Insurance card)			
Referring Physician:		Contact Person:	
Phone:	Fax:		

**** PLEASE SELECT REASON FOR VISIT ****

	Liver disease: Ascites, Portal HTN, Cirrhosis, Hepatocellular carcinoma, Metastatic disease
	Uterine Fibroids: Embolization (UFE) (Needs MRI Pelvis with contrast)
	Venous Disease/Varicose Veins: Acute or Chronic DVT, Leg swelling, Pain, Skin changes, Ulcers, Pelvic Congestion Syndrome, Varicocele/Male Infertility, Arteriovenous malformation
	Spinal Compression Fractures: Kyphoplasty, Vertebroplasty, Vertebral Augmentation, Sacroplasty (Sacral insufficiency fracture)
	Interventional Oncology: Biopsy, Port Placement, Bone marrow biopsy, Tumor thermal ablation, Catheter directed therapy
	Palliative Care: Kyphoplasty with ablation, PleurX for malignant ascites/effusion, Celiac plexus nerve block
	Peripheral Vascular Disease: Abnormal ABI, Claudication, Nonhealing ulcers, Gangrene, Aneurysms (AAA, Splenic artery, Iliac artery), Renal artery stenosis/FMD (HTN), Chronic mesenteric ischemia (SMA/Celiac artery stenosis), Subclavian artery stenosis
	IVC Filter: Placement, Removal (any age/type) and management. (If patient has history of DVT, recommend US venous duplex of the lower extremities within 30 days).
	Dialysis: Catheter management, Peritoneal dialysis catheter placement, AV fistula or graft maintenance
	Other: Biliary, GI (Random liver biopsy, Gastrostomy/Jejunostomy Tube), Urology (Random Kidney biopsy, Nephrostomy), Fallopian Tube Recanalization (infertility), Lymphatic malformation, Prostate Artery Embolization (PAE), Preoperative embolization

NOTES AND STUDIES TO SEND WITH REFERRAL

- Referring note
- Demographic sheet with valid contact information
- Updated Med List
- COPY of insurance cards
- IMAGING related to the appointment within the last year (CT, CTA, MRI, US)



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- Labs: any labs within the last 30 days
- Ultrasounds or Doppler Studies - arterial duplex of any extremity, mesenteric, venous (for DVT or insufficiency studies) - within the last 6 months
- Procedural notes within the last year pertaining to reason for visit

SCHEDULED DATE AND TIME: _____