



HAWAII PACIFIC DEEG

OFFICE NUMBER: (808) 294-3332

FAX number: (808) 593-4031

E-Mail: DEEG@Doctor.Com

Or VERTA@Doctor.com

Dense-Array EEG REQUISITION FORM

Patient's Name: (last) _____ (First) _____ Birthdate _____ Age _____ Gender _____

Patient's Phone (Primary) _____ (Other) _____

Address _____ City _____ State _____ Zip _____

PRIMARY PHYSICIAN _____ (phone) _____ (FAX) _____ (email) _____

Referred by: Same as above or (Name) _____ (phone) _____

Insurance (Name) _____ (plan) _____ Subscriber ID _____

REASON FOR REQUEST: (clinical question) _____

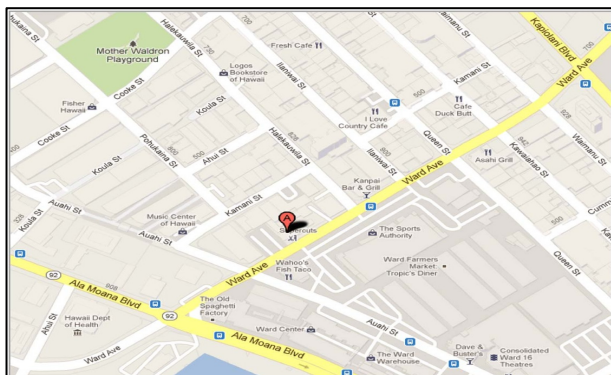
Our Staff will obtain pre-authorization and call patient to arrange appointment.

SERVICES REQUESTED (Circle to Select):

**Dense Array EEG
(DEEG)**

**Consultation with
Dr. Russo**

FOR THE PATIENT – HOW TO FIND US and WHERE TO PARK



320 Ward Avenue, Suite 101
(Same complex as Supercuts)

Enter Ward Court's courtyard. At ground level, inside the Pacific Sleep Tech Neurology and Sleep Disorders' Center offices.

Park in Visitor's Parking or across street at Sports Authority

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