

Access Psychiatry



130 Mabry Hood Road Suite 103, Knoxville TN 37922
Phone: (865) 314-7002 Fax (865) 622-7090

226 Village Square Drive, Loudon TN 37774
Phone: (865) 314-7002 Fax (865) 622-7090

Appointment Request Form

Susan Eby, NP
Dawit Zemichael, MD
Phone: (865) 314-7002
Toll-free 1-866-277-4815
Fax: (865) 622-7090

Preferred location for patient to be evaluated and treated:

Knoxville Clinic
130 Mabry Hood Road Suite 103
Knoxville, TN 37922

Loudon Clinic
226 Village Square Drive
Loudon, TN 37774

Date _____

Patient Name _____

Address _____

Home # _____

Cell# _____

Date of Birth _____

Social Security # _____

Health Insurance #1 _____

ID# _____

Patient referred for: Consultation or Evaluation, Diagnosis, and Treatment

Appointment Request: ASAP 1st Available 1 week Other: _____

Referring Provider _____

Office # _____ Fax # _____

If we need to contact your office for any reason we should ask for _____

Dear Provider: The Centers for Medicare & Medicaid Services permit a patient to choose the provider freely. Please fax this form & copy of insurance card to Access Psychiatry at the preferred facility's fax number provided above. We will contact the patient and set an appointment, check on benefits, eligibility, and prior authorization, and then fax this request back to you.

For Access Psychiatry Use Only Below this Line

Date: _____

Time: _____

Paperwork: Mailed Faxed Patient will download from website

Appointment Date & Time faxed to Referring Provider _____

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