



Sinha Clinic

2560 Foxfield Road, Suite 240, St. Charles, IL 60174

Office: (630) 762-9606 | Fax: (630) 762-9605

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Physician Referral Form

Fax referral form with cover page to Sinha Clinic (630) 762-9605

Patient Information

Patient Name: _____

Date of Birth: _____ Phone Number: _____

Insurance Information: _____

Referral Source

Provider Name: _____

Address: _____

Phone: _____ Fax: _____

Reason for Referral

_____ Medication Evaluation _____ Therapeutic Counseling

_____ Medication Sensitivity Testing _____ qEEG Brain Mapping

_____ Telehealth for Medication Management _____ Neurofeedback

_____ Printed Material

Additional Notes: