



Foothills Pain Management Clinic

Restoring Life By Relieving Pain

DHARMESH MEHTA, M.D.

Board Certified, Pain Medicine
Board Certified, Anesthesiology

Referring MD: _____ Phone: _____ Fax: _____

Patient Name: _____ DOB: _____ Insurance: _____

Differential Diagnosis/Diagnosis _____ Patient Phone: _____

Reason for Consultation

- _____ Comprehensive Pain Evaluation and Management/For Possible:
- _____ Consultation Only
- _____ Epidural Steroid Injection _____
- _____ Diagnostic Injection/Procedure _____
- _____ Sacroiliac Joint Injection _____
- _____ Trigger Point Injection _____
- _____ Nerve Block _____
- _____ Radiofrequency Neurolysis/Rhizotomy _____
- _____ Dorsal Column Stimulator Trial/Implantation _____
- _____ Intrathecal Opioid Pain Pump Trial/Implantation _____
- _____ Specific Requests _____

Please Fax to (626) 608-7322:

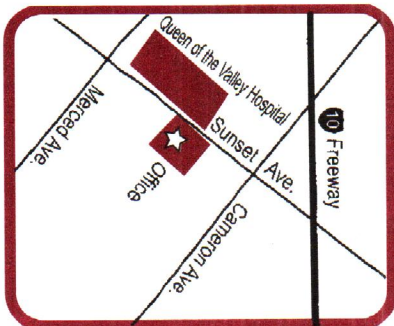
Patient's personal information, insurance information, last 2-3 office notes, and available diagnostic study reports.

Patient is asked to bring to their appointment: insurance cards, picture I.D., all medication in original bottles, MRI and/or X-Ray Report.

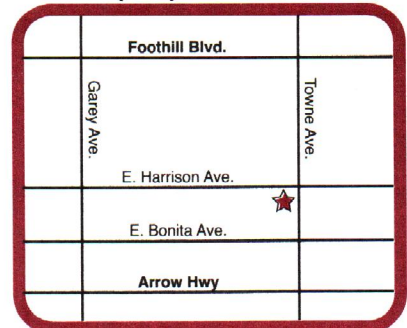
Please feel free to contact our friendly staff for an appointment.

THANK YOU FOR YOUR REFERRAL!

**906 S. Sunset Ave., Suite 105
West Covina, CA 91790
(626) 608-7320**



**2895 N. Towne Ave
Pomona, CA 91767
(909) 764-6480**



**2
Convenient
Locations**