



Plastic Surgery | Reconstructive Surgery | Aesthetics
505 Capitol Street, Charleston WV 25301
Phone: 304-925-8949 | Fax: 304-925-8953

New Patient Referral

Dr. Jeffrey Thaxton

Patient Name: _____ DOB: _____

Address: _____

Home #: _____ Cell #: _____

Referring Physician & NPI: _____

Referring Office Phone: _____ Fax: _____

Diagnosis: _____

Reason for Referral/Visit: _____

Primary Insurance: _____

(A clear copy of insurance card must be attached.)

ID #: _____ Group #: _____

Secondary Insurance: _____

ID#: _____ Group #: _____

Thank you for your referral. Please fax this completed form and records to (304) 925-8953,
Attention: Referrals.

Please note that referrals received without pertinent records (including pathology reports) will not be processed. WV State Medicaid is only accepted for patients with cancer or children under the age of 18.