



THE PAIN CENTER
At FirstChoice HealthCare, P.C.
www.ThePainCenterFCHC.Com

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Florence, SC 29501
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1301 48th Ave. N., Suite D
Myrtle Beach, SC 29577
Phone: (843) 497-5323
Fax: (843) 497-5314

Referral Form:

Patient Name: _____

Patient D.O.B. _____

Phone: (H) _____ Work: _____

Referring Physician: _____

Physician's Phone: _____ Physician's Fax: _____

Diagnosis / Reason for Referral: _____

Special Instructions: _____

Procedures

- Evaluate and Treat
- Trigger Point Injection
- Carpal Tunnel Injection
- Joint Injection _____
- Epidural Steroid Joint Injection
- Facet Joint Injection Block
- Sacroiliac Injection
- Selective Nerve Block
- Peripheral Nerve Block
- Sympathetic Block
- Radiofrequency Ablation
- Celiac Plexus Block
- Percutaneous Microdisctomy
- Spinal Cord Stimulation Trial
- Other

Please bring the following to your visit:

- Insurance Card
- All medications that you are currently taking
- Any pertinent x-rays/reports / imaging studies
- Notes from referring provider

If you need further assistance, please feel free to contact our office staff in Florence or Myrtle Beach.

Appointment Date: _____

Time: _____

Physician _____