

# Hamilton Vascular





**Clear Lake**  
251 Medical Center Blvd.  
Suite 200

**Sugar Land**  
4690 Sweetwater Blvd.  
Suite 200

**Round Rock**  
1650 Round Rock Ave.  
Suite 100

**Stone Oak**  
19016 Stone Oak Pkwy.  
Suite 180

There are four ways to refer a patient:

-  Email form to: [referrals@hamiltonvascular.com](mailto:referrals@hamiltonvascular.com)
-  Submit digital form online: [HamiltonVascular.com/referral](https://HamiltonVascular.com/referral)
-  Fax form to: 512-551-1651
-  Submit in your EMR system

PLEASE BE SURE TO INCLUDE:

- ✓ Demographic Sheet
- ✓ Insurance Information
- ✓ History, Physical & Recent Progress Note
- ✓ Prior Test Results (including ABI report if available)

(1) **Patient Information**

Name:	DOB:
Phone:	Email:

(2) **Reason for Referral (please check all that apply)**

<input type="radio"/> Varicose Veins	<input type="radio"/> Restless Leg Syndrome
<input type="radio"/> Leg Swelling	<input type="radio"/> Hyperpigmentation
<input type="radio"/> Lymphedema	<input type="radio"/> Venous Dermatitis
<input type="radio"/> Venous Insufficiency	<input type="radio"/> Venous Ulcers
<input type="radio"/> Leg Pain	<input type="radio"/> Other:

**Is this a STAT issue (Venous Ulcers)? If so, please call us at 281-306-0367 for immediate scheduling.**

(3) **Patient's Preferred Location**

<input type="radio"/> Clear Lake	251 Medical Center Boulevard, Suite 200, Webster, Texas 77598
<input type="radio"/> Sugar Land	4690 Sweetwater Boulevard, Suite 200, Sugar Land, Texas 77479
<input type="radio"/> Round Rock	1650 Round Rock Avenue, Suite 100, Round Rock, Texas 78681
<input type="radio"/> Stone Oak	19016 Stone Oak Parkway, Suite 180, McKinney, San Antonio 78258

(4) **Ordering Physician Information**

Physician Name:	Clinic Phone:
Office Contact Name:	Clinic Fax: