

  
**ONCOLOGY SPECIALISTS  
OF CHARLOTTE, PA**

2630 E 7th Street ▪ Suite 210 ▪ Charlotte, North Carolina 28204  
7108 Pineville-Matthews Road ▪ Suite 102 ▪ Charlotte, North Carolina 28226  
Phone: 704.342.9577 ▪ Fax: 704.377.0353 ▪ OncologyCharlotte.com

**Justin Favaro, MD ▪ Nasfat Shehadeh, MD**  
**Hadley Spencer, FNP-C ▪ Natalie O'Kelly, FNP-C**  
**Brooke Davis, FNP-C, OCN ▪ Amy Kemmerlin, FNP-C**

---

**MEDICAL ONCOLOGY / HEMATOLOGY PATIENT REFERRAL FORM**

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Patient Name \_\_\_\_\_

Patient SS # \_\_\_\_\_ DOB \_\_\_\_\_

Patient Address \_\_\_\_\_

Patient Phone \_\_\_\_\_ Alternate# \_\_\_\_\_

Patient Insurance \_\_\_\_\_

**\*\*\* SEND COPY OF INSURANCE CARD(s): Front & Back, with this Fax \*\*\***

Diagnosis \_\_\_\_\_

Referring Physician \_\_\_\_\_

Referring Physician Contact Name/Ph. # \_\_\_\_\_

Fax # \_\_\_\_\_

**Direct Address- if applicable (HIE Email address)** \_\_\_\_\_

Ours is: admin@osc.OncoEMRDirect.com

Special Appointment Requests \_\_\_\_\_

Office Location:  Charlotte/ E. 7<sup>th</sup> Street  South Charlotte/Pineville-Matthews Rd

**Or**  First Available

Physician Preference:  Justin P. Favaro, MD, PhD  Nasfat J. Shehadeh, MD

**Or**  First Available

**\*\*\* Please fax demographics**, office visit notes, labs, radiology reports, and pathology reports, as applicable, along with this form in order to assure a timely appointment.

**FAX REFERRAL FORM AND DOCUMENTS TO 704.377.0353 (fax)**

---

**For Oncology Specialists of Charlotte to fill out and fax back to you**

Appointment Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Arrival Time \_\_\_\_\_

Appointment Time \_\_\_\_\_

With Physician \_\_\_\_\_ Location \_\_\_\_\_

**WE WILL CALL THE PATIENT AND SCHEDULE AND THEN  
FAX BACK APOINTMENT INFO. FOR YOUR RECORDS.**

**If you have access to the Phreesia Hub, the appt. info can  
be viewed in here as well.**

**THANK YOU!**