

*Beaumont Neurosurgical Spine Associates*

*Charles B. Clark III M.D.*

*3070 College - Suite:100*

*Beaumont, Texas 77701*

*(409)899-4999*

*Fax (409)899-3978*

*Patients Name:* \_\_\_\_\_ *Date:* \_\_\_\_\_

*Address:* \_\_\_\_\_ *Age:* \_\_\_\_\_

\_\_\_\_\_ *ZIP:* \_\_\_\_\_

*Telephone:*( ) \_\_\_\_\_ *Work:*( ) \_\_\_\_\_

*Social Security #:* \_\_\_\_\_

*Date of Birth:* \_\_\_\_\_ *Referring Doctor:* \_\_\_\_\_

*NPI #:* \_\_\_\_\_

*Referring Doctors phone:* \_\_\_\_\_ *Fax #:* \_\_\_\_\_

*Complaint:* \_\_\_\_\_

*Insurance Info:* \_\_\_\_\_

*Address:* \_\_\_\_\_

\_\_\_\_\_

*Telephone #:* \_\_\_\_\_

*ID#:* \_\_\_\_\_ *Group:* \_\_\_\_\_

**PLEASE FAX, COPY OF INSURANCE CARD, AND PREVIOUS REPORTS**

**THANK YOU,  
DR. CLARK'S OFFICE**