

Neurological Assessment Referral

From: Dr. John Smith
Practice Name: Smith Family Clinic
Address: 123 Main St, Anytown, ST 12345
Phone: (123) 456-7890
Date: October 10, 2023

To: Dr. Emily Johnson
Specialty: Neurology
Address: Neuro Health Center
456 Elm St, Anytown, ST 12345

Patient Information

Name: Michael Davis
Date of Birth: January 15, 1980
Medical Record Number: 001234567

Reason for Referral

I am referring Michael Davis for a comprehensive neurological assessment due to persistent headaches, occasional dizziness, and recent episodes of forgetfulness. His symptoms have been progressively worsening over the past two months, and I believe a specialist evaluation is warranted.

Medical History

- Controlled hypertension
- History of migraines
- No known drug allergies

Current Medications

Lisinopril, Sumatriptan as needed, Multivitamins

Requested Tests

Please consider conducting a MRI and EEG during the assessment.

Copy to:

Patient's primary care physician, Dr. Sarah Lee

Signature:
Dr. John Smith, MD