

# DENT

NEUROLOGIC INSTITUTE

**Amherst:** DENT Tower  
3980 Sheridan Drive  
Amherst, NY 14226

**Orchard Park:** Sterling Medical Park  
200 Sterling Drive Orchard  
Park, NY 14127

**Buffalo:** 40 George Karl Boulevard  
Buffalo, NY 14221

**Main Telephone Number:**  
**716.250.2000**  
[www.dentinstitute.com](http://www.dentinstitute.com)

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

Date of Birth \_\_\_\_\_

Phone Number \_\_\_\_\_

Reason for Exam \_\_\_\_\_

Insurance Company \_\_\_\_\_

Insurance ID Number \_\_\_\_\_

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

Physician's Phone Number \_\_\_\_\_

Physician's Signature \_\_\_\_\_

Date Ordered \_\_\_\_\_

Send a copy to \_\_\_\_\_

Fax Report (Fax#) \_\_\_\_\_

**STAT Report Needed**

## PEDIATRIC & ADULT NEUROLOGY

**APPOINTMENT NEEDED:** To Schedule Call 716-250-2000 Fax: 250-2045

### NEUROLOGY SERVICES

- |   |   |
|---|---|
| <input type="checkbox"/> Headache                     | <input type="checkbox"/> Movement Disorders |
| <input type="checkbox"/> Neuromuscular Disorders      | <input type="checkbox"/> Stroke/Acute TIA   |
| <input type="checkbox"/> Dizziness & Balance/Tinnitus | <input type="checkbox"/> Multiple Sclerosis |
| <input type="checkbox"/> TBI/Concussion               | <input type="checkbox"/> Memory Disorders   |
| <input type="checkbox"/> Epilepsy                     | <input type="checkbox"/> Spine              |
| <input type="checkbox"/> Pediatric Neurology          | <input type="checkbox"/> Other Neurology    |

### OTHER SERVICES

- |  |  |
|--|--|
| <input type="checkbox"/> Psychiatry                    | <input type="checkbox"/> TMS                     |
| <input type="checkbox"/> ECT                           | <input type="checkbox"/> Counseling              |
| <input type="checkbox"/> Neuropsychological Testing    | <input type="checkbox"/> Impact Baseline Testing |
| <input type="checkbox"/> Fluoroscopy Guided Injections | <input type="checkbox"/> Physiatry               |

### CAROTID ULTRASOUND WITH DOPPLER

- Carotid Arteries
- Vertebral Arteries
- Lower Extremity Venous Doppler
- Lower Extremity Arterial Doppler
- TCD
- TCD Micro Bubble Study
- TCD Emboli Detection
- TCD VMR Vasomotor Reactivity

### EEG (ELECTROENCEPHALOGRAM) NEWBORN TO ADULT

- Routine
- 24-hour Ambulatory
- 48-hour Ambulatory
- 72-hour Ambulatory
- Sleep Deprived
- 6-24 hour Long Term\*

\*specify number of hours \_\_\_\_\_

### EMG (ELECTROMYOGRAPHY)

- Area/Extremity \_\_\_\_\_
- Symptoms \_\_\_\_\_
- R/O \_\_\_\_\_

### VESTIBULAR TESTING (DIZZINESS & BALANCE/ TINNITUS)

- Audiometric Hearing Evaluation
- VNG (Videonystagmography)
- Rotary Chair
- VEMP (Vestibular Evoked Myogenic Potential)
- Computerized Dynamic Posturography
- Sound Therapy

### INFUSION THERAPY

Infusion Therapy is available at our Amherst & Orchard Park Offices. Detailed testing forms can be obtained by calling the DENT Infusion Center at 716-250-2011. Fax order information to 716-250-0960.

### SLEEP STUDY/SLEEP APNEA STUDY Scheduling: 716-250-7007

Sleep Studies available at both Amherst and Orchard Park Offices 7 days a week. Pediatric Sleep Studies for children 5 and older.

### \*DENT IMAGING CENTERS (SEE REVERSE SIDE)

Scheduling: 716-250-4674

