



Michigan Oculofacial Specialists

Lawrence Handler, MD
Zachary Pearce, DO

PATIENT REFERRAL FORM

PATIENT NAME AND CELL PHONE

ALTERNATE CONTACT PERSON AND CELL PHONE

REFERRING PROVIDER AND OFFICE PHONE

REASON FOR REFERRAL

APPOINTMENT

☐ Urgent ☐ Routine

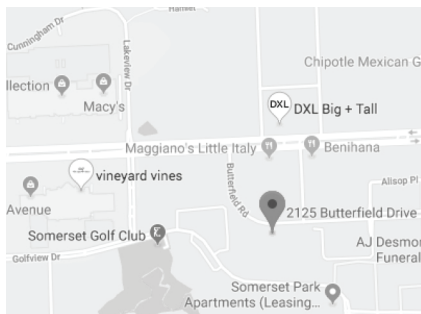
DESIRED PROVIDER

☐ Lawrence Handler, MD ☐ Zachary Pearce, DO ☐ First Available

www.michiganoculofacialspecialists.com

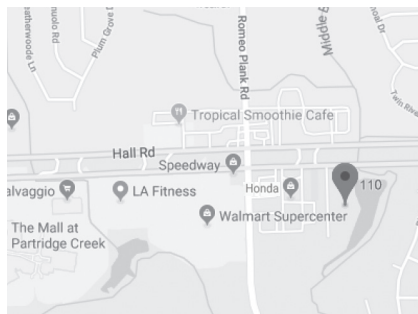
TROY

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