



GRANITE PEAKS GASTROENTEROLOGY

9829 S 1300 E Suite 200 Sandy, UT 84094
Phone: 801.619.9000
Fax: 801.619.9001

Patient Procedure / Office Request Form

Please complete form and **fax to 801.619.9001**
(Please include a copy of the patient's insurance card and face sheet)

Date: _____

Patient Name: _____ Please Circle:
Male / Female

Chief Complaint:

Home #: _____ Work #: _____ Cell #:

DOB: ____/____/____

Insurance: _____ Policy # _____ Group #

Referring Physician:

Referring Physician Office Phone #: _____

Requested:

- Colonoscopy
- EGD
- ERCP
- New Consult
- Office Follow-Up

Physician Requested:

- First Available
- Christopher Cutler, MD
- Steven Desautels, MD
- Andrew Heiner, MD
- Kyle Barnett, MD

David Schmidt, MD

Urgency:

- Routine
- ASAP
- Emergent