

DAVID S. FILIPPI, MD
ACGME-accredited Clinical Neurophysiologist
2 James Way, Suite #101, Pismo Beach, CA 93449

EMG & NERVE CONDUCTION STUDY REQUEST

Referring Physician Name: _____

Phone: _____ Fax: _____

Patient Name: _____

Exam Requested:

- Limited neurologic exam for EMG only (99242)
- Full neurological consultation (99245)

Symptom, Condition, or Suspected Condition To Be Tested:

- | | |
|--|--|
| <input type="checkbox"/> Carpal Tunnel, unilateral (354.0) | <input type="checkbox"/> Spasm of muscle (728.85) |
| <input type="checkbox"/> Carpal Tunnel, bilateral (354.0) | <input type="checkbox"/> Weakness, fatigue, cramps, or twitching, general (728.87) |
| <input type="checkbox"/> Polyneuropathy in diabetes (250.6/357.2) | <input type="checkbox"/> Weakness, fatigue, cramps, or twitching, local (728.87) |
| <input type="checkbox"/> Polyneuropathy, other (355.9) | <input type="checkbox"/> Pain, numbness, or tingling in limb, unilateral (729.5) |
| <input type="checkbox"/> Mononeuropathy (354.9) | <input type="checkbox"/> Pain, numbness, or tingling in limb, bilateral (729.5) |
| <input type="checkbox"/> Foot Drop/Peroneal Nerve Injury (956.3) | <input type="checkbox"/> Cramp in limb, unilateral (729.82) |
| <input type="checkbox"/> Radiculopathy (732.4) | <input type="checkbox"/> Cramp in limb, bilateral (729.82) |
| <input type="checkbox"/> Cervical | <input type="checkbox"/> Plexopathy (953.9) |
| <input type="checkbox"/> Lumbar | |
| <input type="checkbox"/> Chemotherapy or Toxic Neuropathy (357.9) | |
| <input type="checkbox"/> Myopathy (359.9) | |
| <input type="checkbox"/> Hereditary & Idiopathic Peripheral Neuropathy (356.9) | |
| <input type="checkbox"/> Myasthenia Gravis (358.00) | |

Require special authorization:

- Tarsal Tunnel, unilateral (355.5)
- Tarsal Tunnel, bilateral (355.5)
- Amyotrophic lateral sclerosis (335.20)
- Other (**must specify permitted ICD-9 code**):

Area(s) Affected by Symptom or Condition: _____

Please fax this completed form with your patient's insurance and demographic information to (805) 547-2228.