



The Eye Associates

Formerly Bowden Eye & Associates,
Schneider Eye & Wellness Center,
and Janet A. Betchkal, MD

Patient Referral to The Eye Associates Northeast Region

Faxed Referral Requests are processed within 5 business days. Please set this expectation with your patients.

URGENT or EMERGENT Referrals must be scheduled directly with the Referral Department to avoid delay.

Please call 904-648-8306 to schedule all urgent/emergent appointments.

Patient Information

Name: _____ DOB (M/D/Y): _____

Tel: _____ Cell: _____

Address: _____ City: _____ State: _____ Zip: _____

Primary Insurance: _____ Policy Number: _____

Secondary Insurance: _____ Policy Number: _____

Referring Doctor Information

Doctor Name: _____ Office Name: _____

Phone: _____ Fax: _____

Consultation Request

☐ First Available

☐ Janet A. Betchkal, MD

☐ Frank W. Bowden, III, MD

☐ Tim Schneider, MD

☐ Mary-Kate Wilson, MD

☐ Thara Abu-Mallouh, OD

☐ Zachary Boeskool, OD

☐ Philip Griffith, OD

☐ Alice Laflamme, OD

☐ Jerry Robben, OD

Location

☐ Beaches

☐ Northside

☐ Southside

☐ St. Johns

☐ St. Vincent's Riverside

Consultation Type

☐ Cataract

☐ Droopy Lids

☐ Eyelid Lesions

☐ Glaucoma

☐ LASIK

☐ Retina

☐ YAG

☐ Other - Lid Related

☐ Other (Please include notes/details below)

Please evaluate this patient's problems(s) or conditions(s) as described herein:

**PLEASE FAX REFERRALS TO:
REFERRAL DEPARTMENT at 904-861-3899**