

**Hepatologists:** Bahri Bilir, MD  
Clark Kulig, MD

**Surgeons:** Thomas Heffron, MD  
Massimo Asolati, MD

## Liver Care Referral Form

### Referring Provider Information

<b>Provider Name</b>		<b>Practice Name</b>	
<b>Phone Number</b>		<b>Fax Number</b>	

### Patient Information

<b>Patient Name</b>		<b>Patient DOB</b>	
<b>Primary Phone #</b>		<b>Alternate Phone #</b>	

**Comments**  
*(diagnosis, special requests, etc.)*

Please fax this form along with any relevant clinic notes, laboratory results, and/or imaging results to our patient intake specialists. **Fax: 855-879-1423.** Feel free to contact our office at 720-754-2155 with any questions. Office hours are Monday through Friday from 8:00 a.m. to 4:30 p.m.

Our provider-to-provider referral phone number is: **844-Liver-40**

Thank you for the opportunity to participate in the care of this patient.