



Referral Request Form

Patient Name: _____ DOB: _____

Medical Carrier: _____ ID#: _____

Date of Service: _____

Reason for Referral: _____ ICD-10 Code: _____

Referring Provider's Name: _____

Office Phone: _____ Office Fax: _____

Referring to

Coastal Derm & Cosmetic Center

• 215 Tollgate Rd Ste 206A, Warwick, RI 02886 Tel: 401-490-4515 Fax: 401-217-2942

• 750 Reservoir Ave, Cranston, RI 02910 Tel: 401-943-0761 Fax: 401-217-2942

• Linda Hua Zhou, MD NPI: 1770538563

• Su Luo, MD NPI: 1609165315

• Laura Della Torre, MD NPI: 1215086988

• Michael Bharier, MD NPI: 1336145135

• Alicia Vatter (Salisbury), FNP-C NPI: 1265107023

• Kaleigh Rapoza, NP NPI: 1174200976

We are requesting an insurance referral for this date of service generated via an online insurance referral tool. Thank you.

Warwick Office
215 Tollgate Rd, Suite 206A
Warwick, RI 02886

Phone: 401-490-4515 **Fax:** 401-217-2942



Coastal Dermatology
and cosmetic center

Cranston Office
750 Reservoir Ave
Cranston, RI 02910
Phone: 401-943-0761 **Fax:** 401-217-2942