



University of Wisconsin
Hospital and Clinics



**Pain Treatment and Research Center
Pain and Headache Clinic**

5429 East Terrace Drive • Madison, Wisconsin 53718-8339
Phone (608) 263-9550 • Fax (608) 263-0135

University of Wisconsin Hospital and Clinics
600 Highland Avenue • Madison, Wisconsin 53792
CONSULTATION REQUEST

Date of Request: _____

Please fax or mail us this form plus pertinent/recent medical records: clinic notes, test results, consultations. Please also **specifically document this consultation request** in your medical record.

Patient Information

Patient Name: _____
Patient Address: _____
City/State/Zip: _____
UW MR Number (if available): _____
Date of Birth: _____
Phone - Home _____ Work _____
Medical Insurer: _____

Requesting Provider Information

Provider Name: _____
Provider Address: _____
City/State/Zip: _____
Phone: _____ Fax: _____
Email: _____
Primary Medical Provider (if different from above):
Name: _____ Phone: _____

Requested Provider(s) (check below):

- Comprehensive Assessment
Name _____
- Headache Specialist
Name _____
- Interventional Management
Name _____
- Psychologist
Name _____

If your chosen provider is booked heavily, may we assign a different provider to shorten the wait time? Yes No
Are you willing to have your patient see a midlevel provider for the first visit to shorten the wait time? Yes No

Request (check one):

- Consultation (opinion/advice) + procedure if needed
- Consultation + limited-term treatment if appropriate
- Consultation only, no procedure
- Procedure only, no consultation
- Evaluate and treat - no report back required
- Diagnostics:
 - EMG/NCS (electrodiagnostic consultation)
 - Cardiovagal tilt-table test
 - Quantitative sensory testing

Reason for requested visit (complete both):

1. What is the patient's problem? _____

2. What is the key question you want answered: _____

Preferred format (check one):

- Single provider
- Interdisciplinary team (physician, psychologist, physical therapist)

Please note: We do not provide medication maintenance services.

Please make sure the patient does the following:

1. **Fills out our previsit questionnaires** (we will mail these to the patient) and brings them to the first appointment.
2. **Brings pertinent X-ray, MRI, CT, bone scan films and reports** to the first appointment.
3. **Contacts his/her insurance company** for pre-approval. Uninsured patients require preapproval from fiscal office.

Thank you. We will notify you when an appointment is scheduled, and will send a complete report soon after the patient is seen.
We look forward to working with you. — The UW Pain Center Team

Referring Your Patients to the Pain Treatment and Research Center

What services are offered at the Pain Treatment and Research Center (PTRC)?

- Detailed neurological and musculoskeletal assessment
- Physical therapy and exercise prescription
- Pharmacotherapy (No medication maintenance. Patients should not expect opioid prescriptions at first visit)
- Image-guided interventional therapy: nerve blocks, epidural injections, implants
- Psychotherapy
- Biofeedback and relaxation training
- Diagnostic tests (EMG/nerve conduction studies, tilt table, quantitative sensory testing, others)

What services are not offered?

- Addiction medicine or detoxification services
- Long-term medication maintenance services
- Primary medical care; urgent/emergent care

What are the requirements for PTRC evaluation?

- A written professional consultation request, accompanied by relevant medical records
- A physician who is willing to provide primary medical care during treatment at the PTRC, and to resume treatment of the pain problem following discharge from the PTRC

What can you expect from a PTRC evaluation?

- A professional and thorough consultation, with detailed recommendations for treatment
- Outline and schedule of proposed treatment at PTRC, where applicable
- Timely communication to help you better care for your patients

What are the PTRC's goals for its patients?

- Improved function
- Reduced pain
- Improved quality of life

Who are appropriate candidates for evaluation at the PTRC?

- Patients with chronic pain or refractory acute pain (examples: CRPS/RSD, radiculopathy, herpes zoster-related pain)
- Patients who are willing and cognitively able to participate in treatment

Who are not appropriate candidates?

- Patients with conditions requiring emergency medical or surgical care
- Patients with poorly-controlled psychiatric conditions (examples: active psychosis, mania)
- Patients with active addictive disorders; please refer them for AODA treatment first

Are there any insurance considerations?

- Generally, patients must have health insurance to receive treatment. Medicaid from outside Wisconsin is not usually accepted. Exceptions may be made with prior approval and consultation with Patient Financial Services representatives.

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