



Weill Cornell Medical College

NewYork-Presbyterian Hospital  
Weill Cornell Medical Center

Division of Pulmonary and Critical Care Medicine  
Weill Cornell Pulmonary Associates  
Faculty Practice

**Fax Referral form**

Referring Physician: \_\_\_\_\_

Referring Physician Contact Number: \_\_\_\_\_

Needs appointment in :  24 hours  1 week  2 weeks

Name of Patient: \_\_\_\_\_

Patient DOB: \_\_\_\_\_

Contact Info for Patient: \_\_\_\_\_

Reason for Referral: \_\_\_\_\_

Insurance Info: \_\_\_\_\_

Ronald G. Crystal, MD

Joseph T. Cooke, MD

Ben-Gary Harvey, MD

Robert Kaner, MD

Thomas King, MD

Abraham Sanders, MD

Ann Tilley, MD

Dana Zappetti, MD

**Please fax form to 646-962-0110**