



RETINA CONSULTANTS, PLLC

R. MARK HATFIELD, MD, FACS · ROBERT F. DUNDERVILL, III, MD, FACS · DAVID J. HUNT, MD
ABRAHAM S. MITIAS, MD, FACS · SCOTT C. JAMERSON, MD, FACS
JOHN A KULITS, MD
Practice Limited to
Diseases and Surgery of the Retina, Macula, and Vitreous
Diabetic Retinopathy
Macular Degeneration
Ultrasonography

Mailing Address
PO Box 3970
Charleston, WV 25339

Charleston Office
(Administrative Office)
331 Laidley Street
Suite 301
Charleston, WV 25301

Phone 304-346-4400
Fax 304-346-0704

Parkersburg Office
4421 Emerson Avenue
#200
Parkersburg, WV 26101

Phone 304-485-6301
Fax 304-485-6318

Beckley Office
223 George Street
Suite 3
Beckley, WV 25801

Phone 304-252-2558
Fax 304-252-2628

Huntington Office
1151 Hal Greer Blvd.
Huntington, WV 25701

Phone 304-736-9459
Fax 304-736-9461

- ROBERT F DUNDERVILL, M.D., F.A.C.S
- RICHARD MARK HATFIELD, M.D., F.A.C.S.
- DAVID J. HUNT, M.D., F.A.C.S.
- SCOTT C. JAMERSON, M.D., F.A.C.S.
- ABRAHAM S. MITIAS, M.D., F.A.C.S.
- JOHN A KULITS, M.D.

Referring to:

- Charleston Office
- Beckley Office
- Parkersburg Office
- Huntington Office

URGENT Referrals ARE NOT ACCEPTED via fax. You MUST CALL our office

Patient Name: _____

DOB: ____/____/____

Reason for Referral: _____

Requested Referral Timeframe: _____

Please fax the following information:

- Patient demographic sheet (patient name, address, phone number, etc.)
- Exam notes and any applicable records (VF, OR record, labs, etc.)
- Medical Insurance card (front & back)

For Retina Consultants office use only

Appointment Date:

Appointment Time:

Provider:

Patient notified of appointment date and time.