

Wilmington Health Urology and Urogynecology Referral Form

Phone: 910-341-3389	Fax: 9	10-815-3144
Urology Provider Requested	l :	
David Kraebber, MD 120	02 Medical Center Dr.	
Deborah Hess, MD 1202	Medical Center Dr.	
Gail Robinson, FNP 100	0 Brabham Ave., Jacks	sonville
Urologynecology Provider R	Requested:	
Deborah Hess, MD 1202	Medical Center Dr.	
Services and evaluations/tre Disorders of the Bladder, Prostate, Microscopic and Gross Hematuria. Urogynecology. Recurrent UTIs. E Dysfunction. Female and Male Sex Urgency of Request: 1st Ava	and Kidney. Male Infertili . Urinary Incontinence. Bla Bladder and Pelvic Pain. Fe xual Dysfunction.	adder and Vaginal Prolapse. emale and Male Voiding
Patient Name:	•	
Address:		
Phone:	Insurance:	
Referring Provider:		
Phone:	Fax:	
Reason for Referral:		
Important: Please fax all rela	ated medical records in	ncluding demographics,
insurance information, office	e notes, labs and imagi	ing.

Please note: We are currently not accepting new Medicaid/CA patients.