

**Clinic Profile Fax To: 404-705-9942**

1. Clinic Name: \_\_\_\_\_

2. What city will we be locating your clinic under? Please be specific... i.e. Marietta, Buckhead, etc..  
(please do not put Atlanta)

\_\_\_\_\_

3. Clinic Address: \_\_\_\_\_

4. City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

5. Phone Number: \_\_\_\_\_ Fax # \_\_\_\_\_

6. Email: 1) \_\_\_\_\_ 2) \_\_\_\_\_

7. Website: \_\_\_\_\_

8. Landmarks: i.e. (1 block from Marta) ( Next to Wal-Mart Shopping Center) \_\_\_\_\_

9. County: \_\_\_\_\_

10. Public Transportation Accessible? Please be specific.....

11. Doctors names:

\_\_\_\_\_ MD or DO (specialty) \_\_\_\_\_  
\_\_\_\_\_ MD or DO (specialty) \_\_\_\_\_  
\_\_\_\_\_ MD or DO (specialty) \_\_\_\_\_  
\_\_\_\_\_ MD or DO (specialty) \_\_\_\_\_

12. MD in office? Y or N If not, who is your medical affiliation with and what is their specialty?

Name: \_\_\_\_\_

Clinic Name: \_\_\_\_\_

Specialty: \_\_\_\_\_

13. What languages are used in your office? Spanish/ Chinese/ Other \_\_\_\_\_

\_\_\_\_\_

14. Services Provided:

Y or N Rehabilitation (Stimulation, Ultrasound, Strengthening)

Y or N Trigger Point Injections

Y or N Chiropractic Services

Y or N Needle EMG/NCV Diagnostic Testing

Y or N Medication Dispensing In Office

Y or N Epidural Injections

Y or N Nerve Blocks

Y or N Surgical Procedures (Specify: \_\_\_\_\_)

Y or N IME Capability (only can be performed by MD not Chiropractor)

Y or N Impairment Ratings Capability

Y or N Offer Transportation for Patients

***Our Goal Is To Help You Improve Your Practice. If You Can Please Respond To All Questions So We Can See What Areas Of Your Practice May Need Additional Support.***

**Please answer all questions:**

Do you prescribe TENS Units or Other Durable Medical Equipment? Y/N

If no, would you like information on this equipment? Y/N

Do you feel that your office is compliant according to health care industry standards?

If no, would you like information on how you can become more compliant? Y/N

Do you feel that you need help with billing and coding? Y/N

If yes, would you like information on how you can improve your billing and coding? Y/N

Are you presently working with an MRI facility that works with Liens? Y/N

If no, please contact our office so we can introduce you to several locations that work with 678 Got Pain.com