The University of Texas at Austin
UT Health Austin

Health Transformation Building
1601 Trinity Street, Bldg. A
Austin, Texas 78712
1-833-UT-CARES (1-833-882-2737)
uthealthaustin.org

COMPREHENSIVE MEMORY CENTER
Mulva Clinic for the Neurosciences at UT Health Austin
Fax: 512-495-5680

Counseling Referral Form

PERSON BEING REFERRED

Name: _____ DOB: _____

Phone: _____ Email: _____

Address: _____

Primary Insurance: _____ Name of Policy Holder:_____

Member ID: _____ Group #:_____

REFERRING HEALTH PROFESSIONAL

Name: _____ Phone: _____

Clinic/Organization: _____ Fax: _____

REASON FOR REFERRAL

_____ Person with cognitive impairment seeking individual counseling

_____ Family caregiver of a person with cognitive impairment seeking individual counseling

_____ Patient *and* family seeking family counseling

Specify type/stage of cognitive impairment: _____