

Mt Airy Pediatrics, PC  
7056 Germantown Ave  
Philadelphia, PA 19119  
Tel#215-247-2996/ Fax#215-247-7504

Your child's doctor has referred you to an ophthalmologist. Here is a list of suggestions:

-Name: Ophthalmology Physicians and Surgeons, P.C.  
Address: 8200 Flourtown Ave, Ste 15  
Tel#215-836-2500

-Name: Northern Ophthalmic Associates  
Address: Jenkintown, Norristown, Northeast Philadelphia and Center City  
Tel#215-885-6830

-Name: Thorp Bailey Eye Associates  
Address: 4060 Butler Pike, Plymouth Meeting PA  
Tel#215-836-1290

-Name: Dr Leonard Nelson  
Address: multiple sites in Philadelphia & Montgomery County  
Tel#: 610-664-8880 prompt #4, #4

-Name: Dr. Colleen Christian  
Address: 1000 N. Broad Street  
Lansdale, PA 19446  
Tel#215-368-1646

-Name: Drs. Spector, Bailey and Lorato  
Address: St Christopher's Hospital for Children  
Department of Ophthalmology  
Tel#215-427-8120

**\* Routine vision benefits differ depending on your insurance plan. Please call the member services # on the back of your card to confirm what the rules are for your specific insurance plan regarding frequency of routine eye exams and need for referrals from our office or specifically from your vision plan.**

Once you have scheduled your appointment, if your health insurance requires that you have a referral, please call the office to request a referral. Most referrals can now be generated electronically by our office and retrieved in the same manner by your specialist's office. Please allow at least 72 hours' notice for us to process your referral request.

Please make sure you have the following information when you call us for your referral. The specialist or hospital scheduler should be able to provide you with this.

Specialist's provider #: \_\_\_\_\_

to whom the referral should be made out (the doctor, the hospital or the department):

and what your referral needs to say (the procedure(s) or the procedure code(s)): \_\_\_\_\_.