

Dr Ashish Gupta

MBBS MSc FRACS FAOrth CIME

Provider No. 255330MJ

ABN 15 305 896 586

Orthopaedic Surgeon

Date

Patient Name

Date of Birth

Address

Phone

(or affix label here)

Reason for Referral

This referral is valid for twelve months

Referring Doctor

Provider No.

Hospital

Phone

(affix label or stamp here)



+61 7 3208 5552 TEL
+61 7 3208 7775 FAX
office@drashishgupta.com.au

Suite 24 Level 2 Plaza Chambers
15 Dennis Road Springwood
PO Box 1121 Springwood Q 4127

drashishgupta.com.au