

Referral Form & Information

Provider Name: _____
 Hospital: _____
 Patient phone #: _____
 *Hand to patient or fax to 510-297-0558

Patient Info (or affix sticker)

Name: _____
 DOB: _____ Sex: M / F

You need to be evaluated by:

Within: 1-2 days
 3-7 days
 1-2 weeks

Call 510-297-0550 to schedule

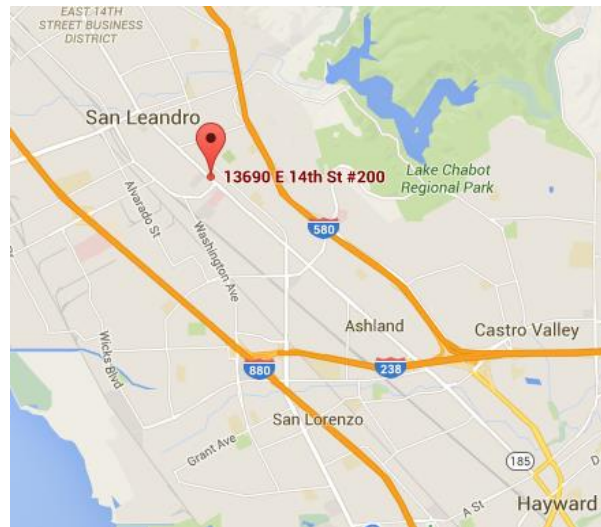
Notes: _____

Location: **13690 East 14th Street #200
 San Leandro, CA 94578**

Please visit www.EBHMC.com to complete a **New Patient Form**
 If you have questions prior to your visit, call us at 510-297-0550

Driving:

- 580 coming from Oakland (West / North)
 Exit Grand Ave and turn left on Frontage Rd.
 Turn Right on Sybil Ave
 Turn Left on East 14th Street
 Office will be on your Left after Lon's Glass
 - 880 coming from Fremont (South)
 Exit Washington Ave.
 Turn Right on San Leandro Blvd...*(see below)
 - 580 coming from Castro Valley (East)
 Exit 150th/Fairmont
 Turn Left on 150th ...*(see below)
 - 880 coming from Oakland (North)
 Exit Marina Blvd Eastbound, go under BART
 Turn Right on San Leandro Blvd...*(see below)
- *... turn North on East 14th St.
 The office will be on your Right before Lon's Glass



BART: Take AC Transit Bus #10 from San Leandro BART station, exit at East 14th and San Leandro Blvd.
 Cross East 14th and head north (towards Oakland). The office will be one block up on your Right.

Bus: The 1, 10, and 40 bus lines all stop near the office. Please check schedules for the best route.

*We have free parking on the premises for our patients.

