

Requestor Information

Attorney/Contact Name:

Company:

Address:

Phone:

Email:

Firm File #:

Bill to Me

Bill to Carrier

Billing Party

Carrier/Company Name:

Adjuster/Contact Name:

Carrier Address:

Phone:

Email:

Claim #:

DOL:

Insured:

Claimant Information

Claimant Name:

Address:

SSN #:

DOB:

Injured Body Part:

Canvass Size

Facility Type

We can search any type of Medical Facility, including pharmacies. Just remember that for every facility type you add, you are dividing the total number of searches. Most common selections include:

Hospitals

Dr. Offices

PT Facility

Other

Pharmacies

Neuros

Orthos

Urgent Care

MRI Facility

Chiros