

In an effort to provide premium health care service to their patients, the physicians listed below have proudly invested in Crescent City Surgical Centre. Their involvement in the management and operations of this hospital enable our staff to provide the care that you deserve.

The following have an ownership interest in Crescent City Surgical Hospital:

| Najeeb Thomas, MD                       | Stephen LaCour, MD                  |
|-----------------------------------------|-------------------------------------|
| Chad Millet, MD                         | Matthew Mutter, MD                  |
| Bradley Bartholomew, MD                 | Richard Vanlangendonck, MD          |
| Felipe Ramirez-Terrassa, MD             | Knight Worley, MD                   |
| Everett Robert, MD                      | Mike Adinolfi, MD                   |
| Manish Singh, MD                        | Alfred Colfry III, MD               |
| Matthew French, MD                      | Angelle Gelvin, MD                  |
| James Leithead III, MD                  | Sean Mayfield, MD                   |
| James Redmann, MD                       | Jennifer Silinsky, MD               |
| Scott Buhler, MD                        | Ares Christakis, MD                 |
| Michael Collins, MD                     | John Guste, MD                      |
| Lance Estrada, MD                       | Alireza Sadeghi. MD                 |
| Simon Finger, MD                        | Ravi Tandon, MD                     |
| Douglas Lurie, MD                       | Kevin Martinez, MD                  |
| Michael McNulty, MD                     | Richard Vanderbrook, MD             |
| Richard Meyer, MD                       | Louisiana Children's Medical Center |
| Field Ogden, MD                         |                                     |
| Andrew Todd, MD                         |                                     |
| Kevin Watson, MD                        |                                     |
| Claude Williams, MD                     |                                     |
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| You have been referred by Dr.           | to Crescent City Surgical Centre    |
| for the following health care services: |                                     |
|                                         |                                     |
| Patient Acknowledgement                 |                                     |
| Patient Name:                           |                                     |
| Patient Signature:                      |                                     |