## **NeuroStar Physician Locator**

## Submission Form



The *NeuroStar Physician Locator (NPL)* 

tool, designed to match prospective patients to providers closest to them, is available to all NeuroStar Advanced Therapy Providers who have completed the full, hands-on Clinical Training program, including NeuroStar University and have started at least 5 patients in NeuroStar Treatment.

Criteria Information: To join the NPL, an account must perform 200+ treatment sessions in a rolling 6-month period or have participated in clinical & front-desk training in the last 12 months. NeuroStar University does count for clinical training. The NPL listing is reviewed after the end of each quarter to determine which accounts have met the criteria to remain on the listing or can be added back on based on the above criteria. **NeuroStar Providers** may edit their listing on the NPL web page at any time by logging in to the NPL portal <u>https://neurostar.com/portal/</u> <u>wp-login.php</u>. After logging in, Providers are responsible for editing or adding practice information, physician bios, practice logos for their listing, and setting up their insurance and payment method options. It is important to remember to update the NPL contact email if there is a change of personnel. Your NeuroStar **Practice Development Manager** can also help you manage and update your listing.

NeuroStar Providers may request to be removed from the NPL at any time by contacting NeuroStar, via email communication (<u>npl@neurostar.com</u>), and requesting to be removed from the NeuroStar Physician Locator (NPL) web page.

Neuronetics may remove any NeuroStar Provider from the NPL web page at any time for one or any of the reasons outlined in the NeuroStar Terms and Conditions of Sale: <u>http://neurostar.com/tc/</u>.

Please fill in the following information. NeuroStar will send you an email with instructions to register for the NeuroStar Physician Locator portal and complete your listing. From there, you can self-manage your listing on the NPL with your own email login and password. We recommend that your completed listing include a physician bio, logo, photo, hours and insurances accepted.

Practice Name:	
PDM Name:	
Practice Phone:	
Location Address:	
Contact Name for NPL Login:	
Email for NPL Login:	

For questions: Email to <u>NPL@neurostar.com</u> To submit this form: Please complete and email to <u>NPL@neurostar.com</u>