

Provider Selection Form

Please select your Provider of choice/PCP from the list below. The providers are listed by primary clinic site.

PLEASE NOTE: YOU MAY CHOOSE ONLY ONE PROVIDER

* Notes scheduled rotation to multiple clinic sites.

DERMOTT MEDICAL CLINIC, Dermott, AR

- Vunkisha Nash, APRN*
- Crystal Little, MD *
- Dana Phillips, APRN*
- Holley Shelton, APRN *

DERMOTT DENTAL CLINIC, Dermott, AR

- Phillip Pennington, DDS
- Hillary Montgomery, RDH
- Olivia Ashcraft, RDH*

WILMOT DOCTOR'S CLINIC, Wilmot, AR

- Cynthia White, APRN *

WILMOT DENTAL CLINIC, Wilmot, AR

- Mike McDaniels, DDS
- Becky Beck, RDH

STAR CITY COMMUNITY HEALTH CENTER, Star City, AR

- Byron Montgomery, APRN
- Holley Shelton, APRN*

STAR CITY DENTAL CLINIC, Star City, AR

- Layne James, RDH

MONTICELLO COMMUNITY CLINIC, Monticello, AR

- Crystal Little, MD*
- Dana Phillips, APRN*
- Jesse Bone, APRN*
- Fredy Cordova, MD

PORTLAND HEALTHCARE CLINIC, Portland, AR

- Don Ball, MD

SCHOOL BASED CLINIC- HAMBURG, Hamburg, AR

- Shenika Jackson-King, APRN

EUDORA MEDICAL CLINIC, Eudora, AR

- Lashelle Harris, APRN
- Vanessa Brass, APRN*

SCHOOL BASED CLINIC- PORTLAND, Portland, AR

- Cynthia White, APRN *

SCHOOL BASED CLINIC- DERMOTT, Dermott, AR

- Vunkisha Nash, APRN *
- Olivia Ashcraft, RDH *

SCHOOL BASED CLINIC- LAKE VILLAGE, Lake Village, AR

- Courtney Johnson, APRN

SCHOOL BASED CLINIC-STAR CITY, Star City, AR

- Leah Williams, APRN
- Layne James, RDH

I understand I have chosen the above marked provider as my Provider of choice/PCP and I understand future appointments will be scheduled with him/her to ensure continuity and improved delivery of care. In the event my provider is unavailable, my appointment may be scheduled with another provider. I understand I have the right to request to change my Provider of choice/PCP to a different Provider in accordance with MHSI policy.

Print Patient Name

Date

Patient's Signature

Parent's Signature or Patient's Representative