



Referral Form Pediatric Nephrology

Patient Information	
Does this patient live with someone other than the legal guardian? <input type="checkbox"/> No <input type="checkbox"/> Yes, relationship: _____	
Patient Name:	Date of Birth:
Parent/Guardian:	Parent/Guardian Cell Phone:
Insurance:	Home Phone:

1. Please select the type of referral: STAT Urgent Routine

If Stat or Urgent, please call our doctor-to-doctor line (909) 558-0099

2. Is this referral for a second opinion? No Yes

<i>Please select diagnosis</i>	<i>Pre-referral work up requirements by diagnosis</i>
<input type="checkbox"/> Abnormal Chemistry BMP, Calcium, Phosphorus, Uric Acid	▪ Low serum bicarbonate on 2 tests of venous blood
<input type="checkbox"/> Abnormal Ultrasound	▪ Blood pressure, CBC, Comprehensive metabolic panel ▪ Urinalysis ▪ Renal ultrasound if none in past 12 months
<input type="checkbox"/> Asymptotic kidney stone **Symptomatic kidney stone, refer to UROLOGY	▪ CBC, Comprehensive metabolic panel ▪ Urinalysis
<input type="checkbox"/> Gross Hematuria **If painful urination, red urine, blood clots: refer to UROLOGY	▪ CBC, Renal function panel ▪ Renal and bladder ultrasound ▪ Physical exam (including blood pressure)
<input type="checkbox"/> Hypertension Blood pressure above 95% for age, gender, height percentile on 3 different days	▪ CBC, Comprehensive metabolic panel ▪ Renal and bladder ultrasound ▪ Urinalysis ▪ Cholesterol
<input type="checkbox"/> Microhematuria Persistent (3 urinalyses on 3 different occasions)	▪ CBC, Renal function panel ▪ Renal and bladder ultrasound

To optimize appointment scheduling, please provide the following by FAX to 909-651-4257

- This completed form
- Medical records related to the chief complaint, including required labs listed above
- A copy of the patient's insurance card
- If authorization is required, was authorization submitted? Yes No Not Applicable

Referring Provider Information

Provider Name: Address: City, State, Zip: Phone: Fax:	OR Provider Stamp
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***Please notify the patient to call our Scheduling Line to make an appointment: 909-651-1904.**