Physician to Complete Date of Referral: _____

Patient Name: _____ DOB: _____

Patient's Home Phone Number: _____ Alternate Number: _____

Address:_____

Referring MD: _____

Referring MD Phone Number:_____

Referring MD Office Fax Number: _____

PLEASE ATTACH MOST RECENT HISTORY AND PHYSICAL AND LABORATORY DATA IF THAT INFORMATION IS NOT AVAILABLE IN THE EVERGREENHEALTH CERNER COMPUTER SYSTEM.

PLEASE COMPLETE THE FOLLOWING INFORMATION

1. Diagnosis/conditions indications for diabetes management referral (**required**):
   ☐ Pre-Diabetes ☐ Type II Diabetes ☐ Post-Acute care transition (retitration)
   ☐ Other _____
2. Complicating Factors(actual or history of):
   ☐ Neuropathy ☐ CKD ☐ Obesity ☐ Adherence Issues
   ☐ Gastroparesis ☐ Dexterity Issues ☐ Vision Issues ☐ Poor Health Literacy
   ☐ CHF
3. Activity Restrictions**:** _____
4. Last Eye Exam: _____ Last Foot Exam:_____ Last Diabetes/Nutrition Education: _____
5. Anticipated Referral Duration:
   ☐ Until primary care or endocrinology follow-up
   ☐ Until HbA1c is at goal for 6 months
   ✓ Indefinite; referral duration per pharmacist recommendation

_____ _____ _____

Physician/Advanced Practice Clinician Signature* **Date** **Time**

_____

Printed Name

*Signature indicates provider's order for evaluation and management of above related conditions by EvergreenHealth Pharmacist Provider Services, assignment of benefits to EvergreenHealth and authorization for the use of Washington State Department of Health, Pharmacy Commission submitted collaborative therapy agreement. Ordered Frequency of Laboratory Tests and Evaluation/Monitoring Clinic Visits: Per treatment plan schedule.

Pharmacist Provider Services Diabetes Management
Phone: (425) 899-2783 Fax: (425) 899-2784 Please fax completed referral forms

EvergreenHealth Kirkland, WA 98034

DIABETES MANAGEMENT – PHARMACIST PROVIDER SERVICE REFERRAL AND PATIENT SPECIFIC TREATMENT PLAN

FORM ID RX 515
Approved 10/19

APPLY PATIENT LABEL HERE

Original – External clinic chart Fax/copy – EvergreenHealth Medical Record

MR