

Patient DOB

Referral for Medical Nutrition Therapy

We specialize in nutrition for adult weight management, diabetes and preventative nutrition. In network with: Aetna, BCBS, Cigna Healthcare, United Healthcare and Medicare. If you have a patient who could benefit from diet and nutrition counseling, please:

- 1. Complete this form OR simply sign form and send along with progress note and basic demographic info.
- 2. Fax completed form along with any pertinent information to **615-219-1216**.
- 3. Let us take care of the rest! We verify nutrition benefits, schedule, and keep you informed of progress.

Today's Date _____

Patient Name _____

Patient Phone

Insurance Company _____

Please be sure to <u>check off medical diagnoses</u> on this form or provide through other records sent.

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E66.01	Morbid obesity d/t excess calories	E10	Type 1 diabetes with
E66.09	Other obesity d/t excess calories	E10.9	Type 1 diabetes w/out complications
E66.1	Drug-induced obesity	E11	Type 2 diabetes with
E66.3	Overweight	E11.9	Type 2 diabetes w/out complications
E66.8	Other obesity	Z79.4	Long term (current) use of insulin
E66.9	Obesity, unspecified	R73.01	Impaired fasting glucose
R63.5	Abnormal weight gain - not pregnant	R73.03	Prediabetes
K75.81	Nonalcoholic steatohepatitis (NASH)	O24.4	Gestational diabetes, controlled
K76.0	Fatty (change of) liver, not classified	O26.00	Excessive weight gain in pregnancy
E88.81	Metabolic syndrome	O99.210	Obesity complicating pregnancy
E28.2	Polycystic ovarian syndrome	E78.00	Pure hypercholesterolemia, unspecified
110	Essential (primary) hypertension	E78.1	Pure hyperglyceridemia
150.9	Heart failure, unspecified	E78.2	Mixed hyperlipidemia
N18	Chronic kidney disease, stage	E78.5	Hyperlipidemia, unspecified
	Other:		Other:

Physician Signature	NPI Number
Physician Name (print)	Phone
Clinic Name	Fax

The above patient is referred for medical nutrition therapy as a necessary part of medical treatment and prevention for the diagnoses listed. The information requested above is Protected Health Information (PHI), and is the minimum necessary to execute the deliver of patient services. Please understand as a link in the "Chain of Trust," all PHI will remain confidential as mandated by the Treatment, Payments and Healthcare Operation Laws Mandated by HIPPA.