



Nephrology Consultation Requests

Diplomates of the American Board of Internal Medicine and Nephrology

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810 Wesley Pines Rd.
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Fax: (910) 608-0322

THIS MUST BE FILLED OUT OR WILL BE RETURNED.

Note: Consult Urology (rather than Nephrology) for first occurrence kidney stones or renal cysts.

Fax all referrals Attention Referral Dept at
(910) 223-1039, (910) 223-0511 or (910) 223-0862

Today's Date: _____

Group NPI#: _____ Doctor's NPI #: _____

Patient Information

Name: _____

Address: _____

Date of Birth: _____ SSN: _____

Preferred Number: _____

Referring Provider Office Information

Office Name: _____

Phone Number: _____ Fax Number: _____

Consult Requested By: _____

Insurance Information

Insurance Provider: _____

Insurance Authorization Number: _____

Referral Checklist

- ☐ Patient Demographic Sheet
- ☐ Office Note (< 2 months from date of referral request)
- ☐ Lab including BUN & Creatinine (< 2 months from date of referral request)
- ☐ Ultrasound of the kidneys (if previously studied)
- ☐ Authorization from insurance company (if required)

Indication For Consult: (One or More indications MUST follow criteria.)

- ☐ Acute Kidney Injury (AKI – decreased kidney function, recent onset)
- ☐ **Chronic Kidney Disease (CKD – GFR < 40 mL/min)**
- ☐ Electrolyte or Acid – Base Disorders
 - ☐ Acidosis ☐ Alkalosis ☐ Potassium ☐ Sodium ☐ Calcium ☐ Phosphorus ☐ Magnesium
- ☐ Hematuria – ☐ Microscopic ☐ Gross
- ☐ Hypertension (Uncontrolled on at least 2 medications)
- ☐ Recurrent Nephrolithiasis (kidney stones - requesting help with prevention)
- ☐ Proteinuria/Nephrotic Syndrome (or persistent albuminuria)

"Dedicated to Meeting the Needs of Patients with Kidney Disease"

www.carolinakidneycare.com