

Humboldt County Referral Form – Specialty Guidelines

St. Joseph Health Medical Group VASCULAR SURGERY

- **Please ask your patient to contact us 3-5 days after sending the referral, to schedule the appointment.** Fax the referral to: 443-4847
- For *Urgent Referrals*, call 443-2248 to speak with the Referral coordinator.
- Unless urgent, eRAF must be included in the referral for patients with Partnership Health Plan.
- Every referral requires: Current demographics, current insurance, and last relevant progress note, recent lab work, relevant recent imaging, medication list, problem list.
- Except for urgent DVT ultrasound, Vascular Surgery will order any necessary arterial or venous ultrasounds.
- The following list a guideline only and not exclusive, if there are any questions please call.

Reason for Referral (Clinical Question)	“Required” Clinical Testing & Documentation	“Preferred” Additional Clinical Testing & Documentation
Upper Extremity Arterial Disease: <ul style="list-style-type: none"> • Upper extremity weakness • Diminished pulses • Asymmetric blood pressures • Raynaud phenomenon 	Pertinent visit notes and state reason for referral.	Current care plan
Lower Extremity Arterial Disease: <ul style="list-style-type: none"> • Lower extremity pain / claudication • Diminished pulses • Nonhealing wounds / Gangrene • Blue toe syndrome • Raynaud phenomenon 	Pertinent visit notes and state reason for referral.	Current care plan
Abdominal Aortic Aneurysm <ul style="list-style-type: none"> • Screening • Known stenosis • Hx of open or endovascular repair 	Pertinent visit notes and state reason for referral.	Current care plan
Giant Cell Arteritis	Pertinent visit notes and state reason for referral.	Current care plan Medications
Carotid Artery Disease: <ul style="list-style-type: none"> • TIA or Stroke • Screening • Known carotid stenosis • Carotid Bruit 	Pertinent visit notes and state reason for referral.	Current care plan Hospital records and any imaging.
Mesenteric Disease: <ul style="list-style-type: none"> • Postprandial Abdominal pain • Unexplained weight loss 	Pertinent visit notes and state reason for referral.	Current care plan
Renal Disease: <ul style="list-style-type: none"> • Hemodialysis Access • Renovascular Hypertension 	Pertinent visit notes and state reason for referral.	Current care plan Nephrologist Last Creatinine/GFR/UA

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Venous Disease / Lymphedema: <ul style="list-style-type: none"> • Lower extremity edema • Varicose veins • Venous thrombosis • Phlebitis • Nonhealing wounds 	Pertinent visit notes and state reason for referral.	Current care plan
Management of hypercoagulable disorders	Pertinent visit notes and state reason for referral.	Medications Labs if already completed, not necessary to order prior to referral.
Diabetic wounds	Pertinent visit notes and state reason for referral.	Current wound care plan Last A1c