

## Humboldt County Referral Form – Specialty Guidelines

### KIDNEY CARE SERVICES OF HUMBOLDT

- We are located at 3220 Broadway Suite A6, Eureka. Phone: 707-599-6700
- Fax referrals to 707-798-6288

Reason for Referral (Clinical Question)	“Required” Clinical Testing & Documentation	“Preferred” Additional Clinical Testing & Documentation
<b>Disease/Kidney only</b>	<ul style="list-style-type: none"> <li>• 1-2 years of metabolic (CMP or BMP) and urine tests (Urinalysis, Urine Alb/Creat, Urine Protein/Creat)</li> <li>• Renal imaging if available (US, retroperitoneum or CT abdomen/pelvis or MRI abdomen/pelvis)</li> <li>• Most recent cardiology note and cardiology testing if done (Echocardiogram, Stress test, ekg)</li> <li>• Most recent note from hematology/oncology if it pertains</li> <li>• Most recent note from pcp with reason for referral</li> </ul>	
<b>Disease PLUS Primary and Internal Medicine</b>	<ul style="list-style-type: none"> <li>• 1-2 years of metabolic (CMP or BMP) and urine tests (Urinalysis, Urine Alb/Creat, Urine Protein/Creat)</li> <li>• Renal imaging if available (US, retroperitoneum or CT abdomen/pelvis or MRI abdomen/pelvis)</li> <li>• Most recent cardiology note and cardiology testing if done (Echocardiogram, Stress test, ekg)</li> <li>• Most recent note from hematology/oncology if it pertains</li> <li>• Most recent note from pcp with reason for referral</li> </ul>	