

SOLU-MEDROL Referral Form



Patient Preferred Clinic (select one):

PATIENT INFORMATION

Referral Status:

New Referral

Updated Order

Order Renewal

| | | | |
|-------------------------|---------------------|----------------------|-------------|
| DOB: | Patient Name: | Patient Phone: | |
| Patient Address: | | Patient Email: | |
| NKDA Allergies: | Weight (lbs/kg): | Height: | |
| ICD-10 code (required): | ICD-10 description: | Last Treatment Date: | Last 4 SSN: |

PROVIDER INFORMATION

| | | | |
|----------------------------|-----------------------------|--------|-----------|
| Referral Coordinator Name: | Referral Coordinator Email: | | |
| Ordering Provider: | Provider NPI: | | |
| Referring Practice Name: | Phone: | Fax: | |
| Practice Address: | City: | State: | Zip Code: |

NURSING

Infusion to be administered per Vivo protocols.

SOLU-MEDROL THERAPY ADMINISTRATION

Please enter dose and frequency:

LABORATORY ORDERS

| | | |
|-------|--------------|-------------|
| CBC | At each dose | Every _____ |
| CMP | At each dose | Every _____ |
| CRP | At each dose | Every _____ |
| OTHER | | |

REQUIRED DOCUMENTATION

Patient Demographics

Insurance Card/Information

Progress Notes Supporting DX

Current Medication List and H&P

*Consider administering premedication for prophylaxis against infusion reactions and hypersensitivity reactions. **Order is valid for one year unless otherwise noted**

| | | |
|-----------------------|--------------------|------|
| Provider Name (Print) | Provider Signature | Date |
|-----------------------|--------------------|------|

| | | | |
|------------------------|--------------------------|-----------------------------|--|
| Fax Numbers | | | Have a Question? (720) 902-4111 Email Referrals To: referrals@vivoinfusion.com Email Specialty Referrals to: info@specialtyinfusion.com |
| Virginia: 804-500-5941 | Nevada: 702-489-5744 | Massachusetts: 800-540-1852 | |
| Colorado: 303-418-4679 | New Jersey: 609-955-3711 | Pennsylvania: 215-399-9244 | |
| Florida: 904-930-4211 | Ohio: 216-400-0674 | New York: 800-540-1852 | |
| Texas: 469-340-0044 | Oklahoma: 918-770-4421 | Connecticut: 203-724-4838 | |