# APPALACHIAN DISTRICT NUTRITION SERVICES

Diabetes Education AND Medical Nutrition Therapy

**Referral Form**

Patient's Name ________________________________
DOB ______________ Phone#:_________________
Address: _____________________________________
Insurance: ___________________________________

Physician Name: ______________________________
Practice: _____________________________________
Practice Phone #: _____________________________
Practice Fax #: _______________________________

**Referring Diagnosis code(s):** ______________________________________________

**Please Attach All Documents Listed below:**

□ Copy of all insurance cards – front & back
□ Note from last doctor's appointment, including diagnosis and diagnosis code
□ Recent lab results
□ Medication list

## Service Requested

□ BOTH Diabetes Education & Medical Nutrition Therapy

**Checking BOTH allows for maximum patient contact hours and best patient outcomes**

□ Individual Diabetes Education
**(For medicare, check barrier if 1:1 DSME/T)**

☐Vision ☐ Hearing ☐Physical
☐ Cognitive impairment ☐ Psychosocial impairment
☐Language barrier ☐ Eating disorder
☐ Learning disability
☐Other (please specify) __________________

**Complication/ Comorbidities –**

☐ Retinopathy ☐Neuropathy ☐ Nephropathy
☐ Gastroparesis ☐ Non-healing wound ☐Stroke
☐ Hyperlipidemia ☐ Hypertension ☐ Cardiovascular disease ☐☐Chronic Renal Insufficiency ☐ PVD

☐ Gestational Diabetes Education – individual education with Registered Dietitian/Certified Diabetes Educator

**Medical Nutrition Therapy**
**(Always completed by Registered Dietitian)**

□ Initial MNT
*Diagnosis does not have to be diabetes*

□ Annual follow-up MNT
□ Additional MNT services in the same calendar year, per RD request.

**Signature & NPI #: (Required)** _________________________________ **Date** ______________
**(Medicare requires MD signature for MNT services)**

**Fax Referral to: 336-372-7793 Referral Questions, Call Penny London 336-372-5644 ext: 1120**
**To speak with Maggi Birdsell, RD, CDE, LDN call 336-372-5644 ext: 2124**