

Outpatient Diabetes Self-Management Education & Support Services

Patient's Name: _____ DOB: _____

Primary Insurance: _____ Secondary Insurance: _____

Home: _____ Cell: _____ Work: _____

PHYSICIANS ORDERS

Diagnosis for Diabetes:

- | | |
|---|--|
| <input type="checkbox"/> Diabetes (Type 2) ICD code: _____ | <input type="checkbox"/> Gestational Diabetes ICD code: _____ |
| <input type="checkbox"/> Diabetes (Type 1) ICD code: _____ | <input type="checkbox"/> Type 1 Diabetes & Pregnancy ICD code: _____ |
| <input type="checkbox"/> Pre-Diabetes/IFG/IGT ICD code: _____ | <input type="checkbox"/> Type 2 Diabetes & Pregnancy ICD code: _____ |

- | |
|---|
| <input type="checkbox"/> Diabetes Self-Management Education & Support Services |
| <input type="checkbox"/> Special Needs Diabetes Self-Management Education & Support Services:
Please circle any existing barriers requiring customized education: impaired mobility, impaired vision, impaired hearing, impaired mental status/cognition, learning disability (specify): _____
Language barrier Language: _____ |
| <input type="checkbox"/> Gestational/Pregnancy with Pre-existing Diabetes Self-Management Education & Support Services
Due Date: _____ Current Gest Age: _____ |

Please provide the following information or include a copy of most recent labs:

Date: _____ HgA1C: _____ % Total Chol.: _____ HDL: _____ LDL: _____ Trigs: _____

Serum Creatinine: _____ GFR: _____

Please list:

Oral Anti-Diabetic Agent: _____

Injectable Anti-Diabetic Agent(non-insulin): _____

Insulin(s): _____

Referring Physician Signature _____ Print Name _____ NPI/MHHS ID. _____ Date _____ Time _____ Phone/Pager ID _____

Please choose which facility the patient prefers and fax form to the number indicated:

- Memorial Hermann Greater Heights, Phone: 713-867-3336, Fax order to: 713-867-4630
- Memorial Hermann Katy, Phone: 281-644-7180, Fax order to: 281-644-7012
- Memorial Hermann Memorial City, Phone: 713-242-3700, Fax order to: 713-242-3964
- Memorial Hermann Sugar Land, Phone 281-725-5050, Fax order to 281-725-5660
- Memorial Hermann Southeast, Phone: 281-929-6485, Fax order to: 281-929-4710
- Memorial Hermann Southwest, Phone: 713-456-5150, Fax order to: 713-456-5179
- Memorial Hermann The Woodlands, Phone: 713-897-2514, Fax order to: 713-897-2381

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