Referral Fax Cover Sheet

To **The Kidney Experts**

Fax **731-300-6955**

Urgent clinician referrals: 731-300-1191

Main line: (731) 300-6155

From

Referring office _____

Referring clinician _____

Office phone _____ Office fax _____

Date _____ Number of pages including cover _____

Patient

Patient name _____ Date of birth _____

Reason for referral _____

_____

_____

☐ Urgent

What to include

☐ Patient demographics and best contact number

☐ Insurance information and referral authorization details, if needed

☐ Recent labs, including eGFR and creatinine when available

☐ Current medication list

☐ Reason for referral and relevant clinical notes