

MEDICAL NUTRITION THERAPY SERVICES REFERRAL FORM

The patient listed below is referred for medical nutrition therapy for treatment & prevention of complications for diagnoses listed below.

Patient name _____ DOB _____
Date of service _____

Preventive and Nutrition-Related Family History -check all that apply				
	ICD-10	Diet Counseling	ICD-10	Family history
	Z71.3	Dietary Counseling and Surveillance	Z82.41	of sudden cardiac death
			Z82.49	ischemic heart disease/ circulatory disease
			Z83.3	of diabetes mellitus
Diabetes-please check appropriate diagnosis				
	ICD-10	Type 1 Diabetes	ICD-10	Type 2 Diabetes
	E10.1	Ketoacidosis	E11.0	Hyperosmolarity without NKHCC
	E10.2	with kidney complications	E11.2	With kidney complications
	E10.3	with ophthalmic complications	E11.3	With ophthalmic conditions
	E10.4	with neurological complications	E11.4	With neurological complications
	E10.5	with circulatory complications	E11.5	With circulatory complications
	E10.6	with other specified complications	E11.6	Other complications
	E10.64	with hypoglycemia	E11.64	With hypoglycemia
	E10.65	with hyperglycemia	E11.65	With hyperglycemia
	E10.8	with unspecified complications	E11.8	Unspecified complications
	E10.9	without complications	E11.9	Without complications
Gestational Diabetes				
	O24.410	Diet-controlled		
	O24.414	Insulin-controlled		
Diagnoses -check all that apply				
	ICD-10	BODY MASS INDEX	ICD-10	DIGESTIVE continued
	Z68.2_	Overweight (BMI 25-29.9)	K21.9	GERD w/o esophagitis
	Z68.3_	Obese BMI (30-34.9)	K58.0	IBS w/diarrhea
	Z68.4_	Obese BMI (35-39.9)	K58.9	IBS w/o diarrhea
	Z68.5	Obese (BMI >40)	K59.0	Constipation, unspecified
	Z68.1	Underweight BMI 19 or less	K59.1	Functional Diarrhea
	ICD-10	WEIGHT MANAGEMENT	K90.0	Celiac disease
	E66.3	Overweight	K50.00	Crohn's disease, small intestine
	E66.9	Obesity, unspecified	K50.10	Crohn's disease, large intestine
	R63.4	Abnormal weight loss	K50.80	Crohn's, small and large intestine
	R63.5	Abnormal weight gain, not pregnancy	K50.90	Crohn's unspecified
	R63.6	Underweight	K51.00	Ulcerative Colitis, w/o complications
	ICD-10	KIDNEY DISEASE	ICD-10	DISEASES OF BLOOD
	N18.1	CKD, Stage 1	D50.8	Iron deficiency anemia, unspecified
	N18.2	CKS, Stage 2	D51.3	B12 deficiency anemia
	N18.31	CKD, Stage 3a	D52.0	Dietary folate anemia
	N18.32	CKD, Stage 3b	ICD-10 FOOD ALLERGIES	
	N18.4	CKD, Stage 4	Z91.010	Peanut
	N18.5	CKD Stage 5	Z91.0111	Milk products
	N18.6	End stage renal disease	Z91.012	Eggs
	N18.9	Chronic kidney disease, unspecified	Z91.013	Seafood
	I12.0	Hypertensive CKD, Stage 5 or ESRD	ICD-10 ADULT MALNUTRITION	
	I12.9	Hypertensive CKD, Stages 1-4	E43	Unspecified severe protein-calorie malnutrition

	Z48.22	Aftercare kidney transplant		E44.0	Moderate protein-calorie malnutrition
	Z94.0	Kidney transplant status		E44.1	Mild protein-calorie malnutrition
	N04.0	Nephrotic syndrome (+ extra character)		E46	Unspecified protein-calorie malnutrition
	ICD-10	CIRCULATORY SYSTEM		E64.0	Sequelae of protein-calorie malnutrition
	I10	Essential (primary) hypertension		ICD-10	MUSCULOSKELETAL SYSTEM
	I15.0	Secondary HTN: Renovascular		M81.0	Age-related osteoporosis w/ fracture
	I15.1	Secondary HTN: Other renal		M81.8	Other osteoporosis w/o fracture
	I15.2	Secondary HTN: Endocrine		ICD-10	FEEDING/GROWTH CHALLENGES
	I15.8	Secondary HTN: Other		R63.31	Pediatric Feeding Disorder, acute
	I15.9	Secondary HTN: Unspecified		R63.32	Pediatric feeding disorder, chronic
	ICD-10	ENDOCRINE/METABOLIC/NUTRITIONAL		R62.51	Failure to thrive
	E28.2	Polycystic ovarian syndrome		F50.0	Eating disorder (+ extra character)
	E88.81	Metabolic syndrome		ICD-10	OTHER (please specify)
	R73.01	Impaired fasting glucose			
	R73.09	Other abnormal fasting glucose (pre-diabetes)			
	E78.0	Pure hypercholesterolemia			
	E78.1	Pure hypertriglyceridemia			
	E78.2	Mixed hyperlipidemia			
	E78.3	Hyperchylomicronemia			
	E78.5	Hyperlipidemia, unspecified			
	ICD-10	DIGESTIVE SYSTEM			
	K21.0	GERD with esophagitis			

Date _____ Provider Signature _____ Provider Name (printed) _____

Provider Phone _____ Provider Fax _____ Email _____

Provider NPI _____

HOW TO SEND TO CHRISTIANNA:

Please fax to Christianna at (475) 233-0048:

- Completed referral.
- Most recent and relevant clinical information including growth charts, notes and labs (A1C, lipid profile, blood pressure and/allergy panels).
- Patient phone and email address.
- Patient insurance information.

Questions: just reach out!

Phone: (203) 693-1913 or Email: christianna@gozzinutrition.com

NOTE: I will contact the patient once I receive all referral information but if they want to learn more, they can visit gozzinutrition.com or contact me via phone or email. Feel free to hand them a business card.