

THE **SPORTS NUTRITION** *Playbook* BY AMY GOODSON

Physician Referral Form

 878-877-6787
  info@thesportsnutritionplaybook.com
 214-286-6886

Patient Name: _____ Patient Date of Birth: _____
 Patient Phone: _____ Patient Email: _____

REQUIRED					
Medical Diagnosis (check all that apply)					
Endocrine, Nutritional and Metabolic Immunity			Digestive System		
E0800	Diabetes II/unspecified		K50919	Chron's disease unspecified, complications	
E109	Diabetes I/no complications		K51019	Ulcerative (chronic) enterocolitis, complications	
E08638	Diabetes II/uncontrolled		K5790	Diverticulosis of colon, part unspecified	
E109	Diabetes I/unspecified complications		K5792	Diverticulitis of colon, part unspecified	
E0810	Diabetes with Ketoacidosis w/out coma		K580/K589	Irritable bowel syndrome, with/without diarrhea	
E162	Hypoglycemia, unspecified		K829	Unspecified disease of gallbladder	
E282	Polycystic Ovarian Syndrome		Genitourinary System		
E7439	Other disorders of carbohydrate absorption		N183	Chronic kidney disease, stage III (moderate)	
E749	Disorder of carbohydrate metabolism, unspecified		N184	Chronic kidney disease, stage IV (severe)	
E780	Pure hypercholesterolemia		N185	Chronic kidney disease, stage V	
E781	Pure hyperglyceridemia		N186	End stage renal disease	
E785	Hyperlipidemia, unspecified		N189	Chronic kidney disease, unspecified	
E782	Mixed hyperlipidemia		Skin and Subcutaneous Tissue		
E756	Lipid storage disorder, unspecified		L272	Dermatitis: due to ingested food	
E8881	Metabolic Syndrome		Symptoms, Signs, Ill-defined		
E669	Obesity, unspecified		R634	Abnormal weight loss	
E6601	Morbid obesity		R635	Abnormal weight gain	
E663	Overweight		R7309	Abnormal glucose	
Circulatory System			Other; optional write in		
I10	Essential hypertension		Z71.3	Dietary counseling and surveillance	
I59	Secondary hypertension, unspecified		Z72.4	Inappropriate diet and eating habits	
I7090	Atherosclerosis, unspecified				
I509	Heart failure, unspecified				

Fax your completed referral to us at 214-286-6886, email us at
info@thesportsnutritionplaybook.com, or return this form to the patient;
 The Sports Nutrition Playbook is HIPAA compliant, and referrals are received via a secure
 e-fax; all emails are HIPAA-compliant under BAA agreement with Google Apps.

Physician Signature: _____ Date: _____

Physician Printed Name: _____