



## Physician Checklist for Reclast Referrals

Please send the following information to process the referral request:

- Patient Demographics** (must include weight)
- Insurance Information**
- Lab results within 60 days to include creatinine serum and calcium levels**
- Dexa Scan results and Physician office notes to include tried and failed therapies** (Documentation does not have to be sent with traditional Medicare)
- Medicare Addendum** (all three sections must be completed) which is located on the Plan of Treatment. This must be completed if the patient has Medicare.
- Plan of Treatment/Orders** (with diagnosis code marked)

Thank you for selecting Palmetto Infusion Services as your provider for infusion therapy. If you have any questions, please contact our office at (803)771-7740 or (800)809-1265. Fax (803)771-7782 or (866)872-8920.

Thank you,