

**Check list for Referrals to Palmetto Infusion Services:**

**Fax referral to 1-866-872-8920**

- Patient Demographics- address, phone number, SS#, etc
- Insurance information- copy of the card(s) if possible
- Plan of Treatment/ Orders
- most recent Physician office notes to include tried and failed therapies- All insurance companies that require a pre-authorization require the notes- this includes Medicare/Medicaid HMO's
- any lab results or any other diagnostic procedures to support the diagnosis. (Colonoscopy, EMG, nerve conduction studies, etc)

This information should suffice for most insurance companies; however there may be some that will require additional documentation/information.

Please indicate name and direct phone number of whom we could speak with to obtain this information: \_\_\_\_\_