

Nutrition Referral Form

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Date:

Patient's Name:

Date of Birth:

Phone Number:

Health Insurance:

Reasons for Nutrition Referral

Below are the most common diagnoses that are covered under most preventative insurance policies. This means that patients will likely have no copay or deductible to see a dietitian depending on the policy. If any of these apply to the patient, please select. If none of these apply to the patient, please add the appropriate ICD-10 code.

| | | |
|------------------------------------------------|--------------------------------------|------------------------------------|
| E66.3 - Overweight | E88.81 - Metabolic syndrome | E11.9 - Type 2 diabetes mellitus |
| E66.01 - Morbid obesity due to excess calories | E78.00 - Hypercholesterolemia | E10.9 - Type 1 diabetes mellitus |
| E66.9 - Obesity unspecified | E78.5 - Hyperlipidemia | |
| R73.03 - Pre-diabetes | I10- Essential hypertension | Z83.3 - Family hx of diabetes |
| R73.01 - Impaired fasting glucose | I25.10 Atherosclerotic heart disease | Z82.49 - Family hx of ischemic CVD |

Other ICD-10 code not listed:

The above is referred for MEDICAL NUTRITION THERAPY as part of medical treatment and prevention for diagnoses above.

Referring Provider's Signature:

Referring Provider's Name:

Referring Provider's NPI: