



Patient Referral Form

Email: refer@geteverlong.com

Fax: +1 (866) 803-5661

Group NPI: 1982209680

Instructions: Please complete this form and send it to us via email or fax using the contact information above. **Be sure to attach photos of both the front and back of the patient's insurance card. We do not accept Medicaid at this time.**

Patient Information

Name: _____

DOB: _____

Email: _____

Phone Number: _____

Insurance Provider: _____

State of Residence: _____

Referring Provider Information

Company: _____

Fax: _____

Medical Provider: _____

Provider NPI: _____

Name of Referring Contact: _____

Phone Number: _____

Provider Signature: _____

Date: _____

Please check all that apply.

Medical Diagnoses

- | | |
|---|---|
| <input type="checkbox"/> E10.9 Type 1 DM Without Complications | <input type="checkbox"/> I10.0 Essential Hypertension |
| <input type="checkbox"/> E11.9 Type 2 DM Without Complications | <input type="checkbox"/> K50.919 Crohn's Disease |
| <input type="checkbox"/> E28.2 Polycystic Ovarian Syndrome | <input type="checkbox"/> K51.90 Ulcerative Colitis |
| <input type="checkbox"/> E66.0 Obesity Due to Excess Calories | <input type="checkbox"/> K52.2 Food Allergies |
| <input type="checkbox"/> E66.01 Morbid Obesity Due to Excess Calories | <input type="checkbox"/> K58.0 Irritable Bowel Syndrome With Diarrhea |
| <input type="checkbox"/> E66.3 Overweight | <input type="checkbox"/> K58.9 Irritable Bowel Syndrome With Constipation |
| <input type="checkbox"/> E66.8 Other Obesity | <input type="checkbox"/> K90.0 Celiac Disease |
| <input type="checkbox"/> E66.9 Obesity Unspecified | <input type="checkbox"/> O24.410 Gestational Diabetes Diet Controlled |
| <input type="checkbox"/> E78.0 Pure Hypercholesterolemia | <input type="checkbox"/> R63.4 Abnormal Weight Loss |
| <input type="checkbox"/> E78.1 Pure Hyperglyceridemia | <input type="checkbox"/> R63.5 Abnormal Weight Gain |
| <input type="checkbox"/> E78.2 Mixed Hyperlipidemia | <input type="checkbox"/> R63.6 Underweight |
| <input type="checkbox"/> E78.4 Other Hyperlipidemia | <input type="checkbox"/> R73.03 Prediabetes |
| <input type="checkbox"/> E78.5 Hyperlipidemia Unspecified | <input type="checkbox"/> Other: _____ |

Eating Disorder Diagnoses

- F50.010 Anorexia Nervosa, Restricting Type, Mild
- F50.011 Anorexia Nervosa, Restricting Type, Moderate
- F50.012 Anorexia Nervosa, Restricting Type, Severe
- F50.013 Anorexia Nervosa, Restricting Type, Extreme
- F50.014 Anorexia Nervosa, Restricting Type, in Remission
- F50.019 Anorexia Nervosa, Restricting Type, Unspecified
- F50.020 Anorexia Nervosa, Binge Eating/Purging Type, Mild
- F50.021 Anorexia Nervosa, Binge Eating/Purging Type, Moderate
- F50.022 Anorexia Nervosa, Binge Eating/Purging Type, Severe
- F50.023 Anorexia Nervosa, Binge Eating/Purging Type, Extreme
- F50.024 Anorexia Nervosa, Binge Eating/Purging Type, in Remission
- F50.029 Anorexia Nervosa, Binge Eating/Purging Type, Unspecified
- F50.20 Bulimia Nervosa, Unspecified
- F50.21 Bulimia Nervosa, Mild
- F50.22 Bulimia Nervosa, Moderate
- F50.23 Bulimia Nervosa, Severe
- F50.24 Bulimia Nervosa, Extreme
- F50.25 Bulimia Nervosa, in Remission
- F50.810 Binge Eating Disorder, Mild
- F50.811 Binge Eating Disorder, Moderate
- F50.812 Binge Eating Disorder, Severe
- F50.813 Binge Eating Disorder, Extreme
- F50.814 Binge Eating Disorder, in Remission
- F50.819 Binge Eating Disorder, Unspecified

Medicare Diagnoses

- E10.1 Type 1 Diabetes Mellitus With Ketoacidosis
- E10.2 Type 1 Diabetes Mellitus With Kidney Complications
- E10.3 Type 1 Diabetes Mellitus With Ophthalmic Complications
- E10.4 Type 1 Diabetes Mellitus With Neurological Complications
- E10.5 Type 1 Diabetes Mellitus With Circulatory Complications
- E10.6 Type 1 Diabetes Mellitus With Other Specified Complications
- E10.64 Type 1 Diabetes With Hypoglycemia
- E10.65 Type 1 Diabetes With Hyperglycemia
- E10.8 Type 1 Diabetes Mellitus With Unspecified Complications
- E10.9 Type 1 Diabetes Mellitus Without Complications
- E11.0 Type 2 Diabetes Mellitus With Hyperosmolarity
- E11.2 Type 2 Diabetes Mellitus With Kidney Complications
- E11.3 Type 2 Diabetes Mellitus With Ophthalmic Complications
- E11.4 Type 2 Diabetes Mellitus With Neurological Complications
- E11.5 Type 2 Diabetes Mellitus With Circulatory Complications
- E11.6 Type 2 Diabetes Mellitus With Other Specified Complications
- E11.64 Type 2 Diabetes With Hypoglycemia
- E11.65 Type 2 Diabetes With Hyperglycemia
- E11.8 Type 2 Diabetes Mellitus With Unspecified Complications
- E11.9 Type 2 Diabetes Mellitus Without Complications
- N18.31 Chronic Kidney Disease, Stage 3a
- N18.32 Chronic Kidney Disease, Stage 3b
- N18.4 Chronic Kidney Disease, Stage 4
- N18.5 Chronic Kidney Disease, Stage 5
- Z48.22 Encounter for Aftercare Following Kidney Transplant
- Z79.4 Long-Term (Current) Use of Insulin
- Z94.0 Kidney Transplant Status

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