

CENTER FOR ADVANCED WOUND CARE AND HYPERBARIC MEDICINE REFERRAL REQUIREMENTS

A signed MD referral is required and must include the following:

- Diagnoses ICD-10.
- Reason for referral, wound management or hyperbaric oxygen therapy treatment.
- Include any precautions or restrictions.
- Is the wound a work-related injury?
- Recent progress notes/reports.
- Patient demographics information (ss#, telephone #, address and insurance information).
- Referring physician name, CA license number NPI, address and phone number.

Fax all documentation to 408-947-3480