Texas Health
Presbyterian Hospital
DALLAS

Healing Hands. Caring Hearts.℠

Ostomy Management Program
Wound Clinic
8198 Walnut Hill Ln,
Jackson Bldg, 1st floor, Clinic C
Dallas, TX. 75231
Phone 214-345-4334 FAX 214-345-4183

FAX

To: Angela	From:
Fax: (214) 987-1845	Pages:
Phone:	Date: 11/20/18
CC:	Re:

Urgent Review Comment Reply Recycle

NOTES:

Your patient has requested Ostomy Education and Management. Please fill out the attached Physician order Form and Fax back with:

- **Physician Order Form**
- **Insurance Information**
- **Patient Demographics (Face Sheet)**
- **History and Physical**

MUST Have prior to scheduling an appointment, Mondays - Fridays 1pm-2pm

Please **fax** this to **214-345-4183**. If you have any questions or need assistance, **call 214-345-4334.**

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Ostomy Education and Management Program Referral Form

Office # 214-345-4334 **FAX # 214-345-4183**

Patient' Name(Last, First, M)	Date of Birth

****** Attach Patient's Demographics, insurance Information and H&P**

Ostomy Type

Colostomy	Ileostomy	Urostomy	Others

Patient's Limitations

Language	Hearing impairment	vision Impairment	Dexterity

Education/Management Ordered

OSTOMY	FISTULA	PERCUTANEOUS TUBE
o Pre-op teaching and counseling	o Establishment and modification of effective containment system	o Stabilization of newly placed tube
o Stoma site selection & Marking.	o Protection of Peri fistula skin	o Site Care and tube management
o Client, family education and counseling		o Hypertrophic granulation tissue
o Individualized instruction of basic principle of care		
o Routine follow up after hospital/agency discharge		
o Other:		

As health care provider, I certify Ostomy Self- Management Training is needed to ensure therapy compliance, necessary skills and knowledge to enable this patient to manage his/her condition.

Physician Name	Signature	Date