

McLaren Print System Order

Order No: 41986
Order Date: 2019-01-16
User: Andrea Bennett
Phone: 342-3900

Ship Location: McLaren Flint Beechill Ctr
G3200 Beecher Rd
Flint, MI 48532

Forms

Quantity: 500
Paragon Dept No: 36110
Dept Name: Sleep Center
Company Number: 60

Order Total Price: 0.00

Item Number: M-17982
Item Description: Direct_Referral_Order
Revision Date: 9/2015
Print: 1 sided black and white
Paper: 20# White Text
Size: 8.5 x 11
Fold: None
Finish: None
Drill: None
Misc Info:

McLaren Flint
Flint, MI
SLEEP DIAGNOSTIC CENTER
DIRECT REFERRAL ORDERS

COMPLETED BY OFFICE STAFF:

- Sleep Referral Received
- Health/Sleep History Questionnaire
- Submitted for Approval

REVIEWED BY MEDICAL DIRECTOR:

- Schedule patient for Sleep Consult prior to performing study
- Request the following test results from the referring physician _____
- Other _____

Yes No Meets criteria for approval of sleep study

- Diagnostic PSG and CPAP if needed (HST if required)
- Split study
- CPAP Titration
- BiLevel Titration
- Follow up Titration to ensure current PAP level is therapeutic
- MSLT
- Other _____

CLINICAL INDICATION FOR SLEEP STUDY:

- OSA G4T33
- Hypersomnia G4T30
- Other _____

Spec Info:

Sleep Physician Signature

Date/Time

DIRECT REFERRAL ORDERS
1/16/19



0400

