Maternal Fetal Medicine Patient Referral Worksheet

Edith Cheng, MD; Jane Hitti, MD; Joseph Hwang, MD; Alisa Kachikis, MD; Asha Rijhsinghani, MD; Laura Sienas, MD; Victoria Binns, LCGC; Kathleen Kenley, LCGC

Please fax this form and ALL patient records (prenatal records, labs, ultrasounds) to us at 425.690.9477. Please call 425.690.3477 to schedule.

Patient name: _____

DOB: _____ SSN: _____

Patient phone: _____ Alternate: _____

Patient address: _____

Referring provider: _____

Provider phone: _____ Provider fax: _____

Interpreter: ☐ No ☐ Yes - Language: _____

LMP: _____ EDD: _____

REASON FOR REFERRAL: _____

DX CODES: _____

SERVICES REQUESTED:

1. ☐ **CONSULT + ULTRASOUND**
2. ☐ **ULTRASOUND ONLY**

   Ultrasound ONLY *NO CONSULTATION WILL BE PERFORMED if not marked above*
3. **PRENATAL SCREENING**

   ☐ First Trimester Screening

   ☐ Other: _____

Provider signature: _____ Date: _____

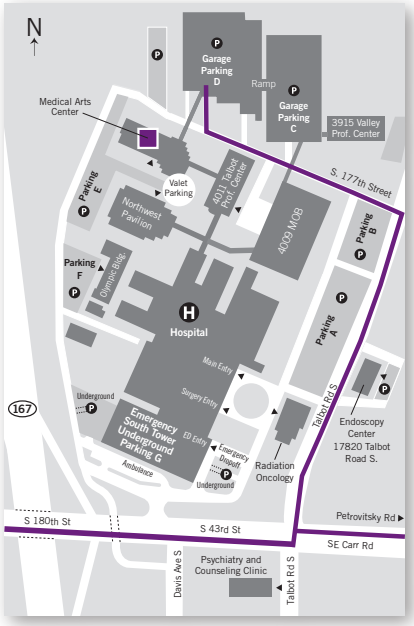
PLEASE FAX / SEND ALL PERTINENT RECORDS PRIOR TO APPOINTMENT TO AVOID DELAYS.

Note: IF REFERRAL IS DUE TO ABNORMAL FAMILY/PREGNANCY HISTORY, PLEASE ENCOURAGE PATIENT TO OBTAIN/FORWARD PERTINENT RECORDS TO OUR CLINIC.

Maternal Fetal Medicine Clinic

4033 Talbot Rd South, Suite 450, Renton WA 98055 425.690.3477

An affiliate of UW Maternal Fetal Medicine



Directions: From S. 43rd St. or SE Carr Road, drive north on Talbot Road. Turn left at the next light (S. 177th St.) into the hospital campus. Park in Garage D. Walk through the 3rd floor skybridge into the MAC. Take the elevator up to the 4th floor. Turn right out of the elevator: MFM is at the end of the corridor.

Maternal Fetal Medicine Clinic

UW Medicine
VALLEY MEDICAL CENTER

Seattle Children's
HOSPITAL · RESEARCH · FOUNDATION

COMPLICATIONS RELATED TO PREG	
640.03	Threatened abortion (antepartum)
640.83	Other specificed Hemorrhage (antepartum)
640.90	Unspecified hemorrhage (antepartum)
641.0*	Placenta previa W/O hemorrhage
641.1*	Hemorrhage from placenta previa
641.2*	Prematue separation of placenta
641.8*	Other antepartum hemorrhage
MATERNAL MEDICAL PROBLEMS	
648.0*	Diabetes
648.1*	Thyroid Dysfuntion
648.2*	Anemia
648.3*	Drug Dependence
648.4*	Mental Disorders
648.5*	Cardiovasular disorder, Congenital
648.6*	Cardiovasular disorder, Other
648.7*	Bone/Joint disorders
648.8*	Abnormal Glucose Tolerance
648.9*	Other current conditions
MATERNAL CONDITIONS AFFECTING MGMT	
659.5*	AMA, Primip
659.6*	AMA, Multip
654.0*	Congenital abnormal Uterus
654.5*	Cervical Incompetence
654.6*	Cervical abnormalitlies other
671.3*	Deep phebothrombosis
642.0*	Benign essential hypertension
642.1*	Hypertension secondary to renal disease
642.2*	Other pre-existing Hypertension
642.3*	Transient Hypertension
642.4*	Mild or unspecificied pre-eclampsia
642.5*	Severe Pre-eclampsia
642.6*	Eclampsia
642.7*	Pre-eclampsia on pre-existing hypertension
642.9*	Unspecified Hypertension
640.03	Threatened abortion < 22 wks (antepartum)
640.83	Other specificed Hemorrhage (antepartum)
640.90	Unspecified hemorrhage (antepartum)
641.0*	Placenta previa W/O hemorrhage
641.1*	Hemorrhage from placenta previa
641.2*	Prematue separation of placenta
641.8*	Other antepartum hemorrhage
643.0*	Hyperemesis mile < 22wks
643.1*	Hyperemesis metabolic disturbance
643.2*	Vomitting late Pregancy >22 wks <40-42 wks
645.1*	Post term 40-42 wks
645.2*	Post term >42 wks
644.0*	Preterm Labor >22 wks <37wks
646.1*	Edema/excessive weight gain
646.8*	Insufficient weight gain
649.1*	Maternal Obesity
649.6*	Uterine Size discrepancy
649.7*	Cervical Shortening
654.0*	Uterine Abnormality other
654.1*	Uterine Abnormality Congenital
654.2*	Previous cesarean delivery, unspecified as to episode of care or not applicable
654.4*	Uterine abnormality other
654.50*	Cervical incompetence
654.6*	Other congenital or acquired abnormality of cervix
654.9*	Uterine scar/other
659.8*	Complic labor NEC-unsp

MALPOSITION/PRESENTATION	
652.0*	Unstable lie,
652.1*	Breech /malpresentation
652.2*	Breech presentation without mention of version
652.3*	Transverse or oblique presentation
652.4*	Face or brow presentation
652.5*	High head at term
652.6*	Multiple gestation with malpresentation of one fetus or more
MULTIPLE GESTATIONS	
651.0*	Twin pregnancy-unspec
651.1*	Triplet pregnancy-unspec
651.2*	Quadruplet preg-unspec
651.3*	Twins w fetal loss-unsp
651.4*	Triplets w fet loss-unsp
651.5*	Quads w fetal loss-unsp
651.6*	Mult ges w fet loss-unsp
651.7*	Mul gest-fet reduct unsp
651.8*	Multi gest NEC-antepart
651.9*	Multi gestat NOS-unspec
SUPERVISION W/HISTORY OF	
V23.0	SupervisionPreg w hx of infertility
V23.1	Supervision Preg w hx-trophoblas dis
V23.2	Supervision Preg w hx of abortion
V23.3	Supervision Grand multiparity
V23.41	Preg w hx pre-term labor
V23.49	Preg w poor obs hx NEC
POSTPARTUM CONDITIONS	
671.44	DVT, PP
675.14	Mastitis
670.04	Puerperal Infection
667.41	Retained POC
674.14	Wound Dehscience/Disruption
666.24	Hemmorrhage Delayed
674.34	Wound Infection
FETAL ABNORMALITY AFFECTING MGMT	
655.0*	Central nervous system malformation in fetus
655.13	Chromosomal abnormality in fetus
655.2*	Hereditary disease in family possibly affecting fetus
655.3*	Suspected damage to fetus from viral disease in the mother,
655.4*	Suspected damage to fetus from other disease in the mother
655.5*	Suspected damage to fetus from drugs,
655.6*	Suspected damage to fetus from radiation
655.7*	Decreased fetal movements
655.8*	Other known or suspected fetal abnormality
655.9*	Unspecified suspected fetal abnormality
FETAL AND PLACENTAL PROBLEMS AFFECTING MGMT	
656.0*	Fetal-maternal hemorrhage
656.10*	Rhesus isoimmunization
656.1*	Rhesus isoimmunization
656.2*	Isoimmunization from other and unspecified blood-group incompatibility
656.3*	Fetal distress, affecting management of mother
656.4*	Intrauterine death
656.5*	Poor fetal growth, affecting management of mother Poor fetal growth-unspec
656.6*	Excessive fetal growth Excess fetal grth-unspec
656.7*	Other placental conditions
656.8*	Other specified fetal and placental problems
656.9*	Unspecified fetal and placental problem
657.0*	Polyhydramnios, unspecified as to episode of care or not applicable Polyhydramnios-unspec
658.0*	Oligohydramnios-unspec
658.1*	Premature rupture of membranes, unspecified as to episode of care or not applicable
658.2*	Delayed delivery after spontaneous or unspecified rupture of membranes, unspecified as to episode of care or not applicable
658.3*	Delayed delivery after artificial rupture of membranes, unspecified as to episode of care or not applicable
658.4*	Infection of amniotic cavity, unspecified as to episode of care or not applicable
658.8*	Other problems associated with amniotic cavity and membranes, unspecified as to episode of care or not applicable
658.9*	Unspecified problem associated with amniotic cavity and membranes, unspecified as to episode of care or not applicable
COUNSELING CODES	
V26.3	Genetic Counseling
V26.4	Pre Preg Consult
V16.41	Ovarian Cancer, Family HX
V10.43	Ovarian Cancer, Personal HX
V16.3	Breast Cancer, Family HX
V10.3	Breast Cancer, Personal HX
V16.0	Colon Cancer, Family HX
V10.0	Colon Cancer, personal HX
AMNIOCENTESIS	
V28.0	Antenatal screening for chromosomal anomalies by amniocentesis
V28.1	Antenatal screening for raised alpha-fetoprotein levels in amniotic fluid
V28.2	Other antenatal screening based on amniocentesis
ULTRASOUND	
V28.3	Encounter for routine screening for malformation using ultrasonics
V28.4	Antenatal screening for fetal growth retardation using ultrasonics
OTHER SCREENING CODES	
V28.5	Antenatal screening for isoimmunization
V28.6	Antenatal screening for Streptococcus B
V28.81	Encounter for fetal anatomic survey
V28.82	Encounter for screening for risk of pre-term labor
V28.89	Other specified antenatal screening
V28.9	Unspecified antenatal screening
796.5	Abnormal antenatal screening finding
GENE CARRIER STATUS	
V18.0	Family history of diabetes mellitus
V18.11	Family history of multiple endocrine neoplasia [MEN] syndrome
V18.19	Family history of other endocrine and metabolic diseases
V18.2	Family history of anemia
V18.3	Family history of other blood disorders
V18.4	Family history of mental retardation
V18.9	Family history of genetic disease carrier
V19.5	Family HX, Congenital Anomalities
V19.8	Family history of other condition
V83.81	Cystic fibrosis gene carrier
V83.89	Other genetic carrier status

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