

Rhode Island Hospital 2 Dudley Street

Cooperative Care Building (Coop) 1st Floor

Providence, RI 02905 Phone: 401-444-5471 Fax: 401-444-4557

BURN CLINIC

 $\underline{http://www.lifespan.org/rih/services/ambulatory/}$

Referral Guidelines MR#

Date of Referral:

Session	1 imes:	wionday	Mornings
D1		. 11	

Patient's Name:

Signature:

Please note this clinic does not accept patients under the age of eighteen. All pediatric patients should be referred to Pediatric Surgery in the MOC Room 180 Phone # 421-1939

Address:	Requesting	Requesting Physician:	
DOB: Sex:	Address:		
SS#:			
Interpreter Required: Y N Language:			
Phone:	Phone:	Phone:	
Insurance:	Fax:	Fax:	
REFERRAL. Patients must call 444-7850 to sp	peak to a Patient Financial Services assistance from RIH. Thank-you!	REQUIRED INFORMATION WITH THE (PFS) advocate if they choose to seek financial	
Guidelines All REFERRALS. Linelada at 2a last RE	*Diagnostic Imaging	Other	
Partial thickness > 10% total body surface bur genitalia, perineum, or major joints. Third deg including lightning injury, chemical burns, introducing medical disorder that can complicate concomitant trauma, burn injury In patients who require special social, emot rehabilitative intervention	REFER DIRECTLY TO RIH ER OUTSIDE ER CALL 444-4000 PAGE BURN MD ON CALL		
Partial thickness burns<10% total	None	Sterile dressings with Silvadene refer to clinic within 1-2 weeks	
Reason for Referral:			

Print Name: