

**Allison Beach Nutrition, LLC**  
 6275 W Plano Pkwy Suite 500,  
 Plano, TX 75093  
**Phone:** 469-892-8518 | **Fax:** 469-896-4824

Date:	Patient name:
Day time Phone:	Insurance:
DOB:	Address:

Please place a  
 ✓ in the box  
 that best  
 describes the  
 patient's  
 diagnosis

√	ICD -10	ICD - 10 Description
		<b>Type 1 diabetes mellitus</b>
	E10.1	Type 1 diabetes mellitus with ketoacidosis
	E10.2	Type 1 diabetes mellitus with kidney complications
	E10.3	Type 1 diabetes mellitus with ophthalmic complications
	E10.4	Type 1 diabetes mellitus with neurological complications
	E10.5	Type 1 diabetes mellitus with circulatory complications
	E10.6	Type 1 diabetes mellitus with other specified complications
	E11._	<b>Type 2 diabetes mellitus</b>
	E11.0	Type 2 diabetes mellitus with hyperosmolarity
	E11.2	Type 2 diabetes mellitus with kidney complications
	E11.3	Type 2 diabetes mellitus with ophthalmic complications
	E11.4	Type 2 diabetes mellitus with neurological complications
	E11.5	Type 2 diabetes mellitus with circulatory complications
	E11.6	Type 2 diabetes mellitus with other specified complications
	E11.9	Type 2 diabetes mellitus without other specified complications
	Z79.4	Long term (current) use of insulin
	N18.5	Chronic <b>kidney disease</b> , stage 5
	N18.4	Chronic kidney disease, stage 4
	N18.32	Chronic kidney disease, stage 3b
	N18.31	Chronic kidney disease, stage 3a

The above patient is referred for **medical nutrition therapy** as a necessary part of medical treatment and prevention for the diagnoses listed.

Physician Signature \_\_\_\_\_

Phone \_\_\_\_\_

Print MD Name \_\_\_\_\_

Fax \_\_\_\_\_

NPI Number \_\_\_\_\_

The information requested above is Protected Health Information (PHI), and is the minimum necessary to execute the delivery of patient services. Please understand as a link in the "Chain of Trust," all PHI will remain confidential as mandated by the Treatment, Payments and Healthcare Operation Laws mandated by HIPPA.