



Request for Maternal Fetal Medicine Services

PLEASE FAX THIS FORM TO 773-926-0740

INCLUDE: PATIENT RECORDS, LAB WORK, SCREENING RESULTS, ULTRASOUND IMAGES AND HMO AUTHORIZATION

Patient Information

Patient name: _____ DOB: ____/____/____ Address: _____

Phone: _____ Alt. Phone: _____ Email: _____

LMP: _____ EDD: _____ (dated by US or LMP) GA: _____

Insurance Information- please include copy of insurance card

Primary Insurance Company: _____ Group/Policy #: _____ Member #: _____

Policy Holder Name: _____ DOB: ____/____/____ Relationship: _____

Policy Holder's Employer: _____ Employer Location: _____

Services Requested (Check all that apply):

- Fetal and Neonatal Care Center**
 - For known/suspected Fetal Anomalies
 - Includes MFM consult, Ultrasound and Genetic counseling if needed
- Maternal Fetal Medicine Consult**
- Genetic Counseling**
- Establish/Transfer Care**
- Other (please indicate)**

Reason for Referral, IDC-10 Code or Diagnosis/Condition:

Ultrasound with consult if needed

- _____ Singleton _____ Multiple
- 1st trimester scan (Transabdominal approach)
- 1st trimester Nuchal translucency (11w0d-13w6d)
- Level I anatomy (Low risk pregnancy)
- Level II anatomy (High risk pregnancy)
- Cervical Length/early pregnancy dating (Transvaginal approach)
- Fetal Doppler (Umbilical Artery, MCA, etc.)
- Follow Up Growth- must have been seen and have completed anatomical survey at UCM
- Biophysical Profile
 - Without NST
 - With NST
- Pelvic Ultrasound Complete – Non OB (Transabdominal approach)
- Pelvic ultrasound Non-OB (Transvaginal approach)
- Fetal echocardiogram with consult
- Fetal echocardiogram without consult

Referring Provider Information

Name: _____ Preferred Contact for abnormal results: _____

Address: _____

Office Phone: _____ Office Fax: _____

Main Campus Location:
University of Chicago
Duchossois Center for
Advanced Medicine
5758 S. Maryland Ave.
Chicago, IL 60637
Fax: 773-926-0740
Appts: 773-702-6118

Orland Park, IL
University of Chicago Medical
Center for Advanced Care
14290 South La Grange Road
Orland Park, IL 60462
Fax: 773-926-0740
Appts: 773-702-6118
Sarosh Rana, MD; Deborah
Boyle, MD; Anne Dude, MD

Schererville, Indiana
Univ. of Chicago Health Specialists
222 Indianapolis Blvd
Schererville, IN 46360
Fax: 773-926-0740
Appts: 773-702-6118
Mahmoud Ismail, MD
Roxane Holt, MD