LONG BEACH MEMORIAL
MEMORIALCARE HEALTH SYSTEM
Miller Children's Hospital Long Beach

Wound Healing Center
2888 Long Beach Blvd., Suite 125
Long Beach, CA 90806

Hyperbaric Medicine
2801 Atlantic Ave, 6th Floor
Long Beach, CA 90806

REFERRAL

Patient Name:______________________________________ Date of Birth:______________ Today's Date:____________

Patient's Phone:___________________ Primary Ins:_____________________ Secondary Ins:______________________

Referral Requested: ☐Stat (please call) ☐First available

Reason for Referral:

☐**Wound Care Evaluation & Treatment**

☐Diabetic foot ulcer
☐Venous leg ulcer
☐Arterial insufficiency ulcer
☐Pressure (decubitus) ulcer
☐Vaculitis/inflammatory ulcer
☐Surgical wound complication (e.g. Infection, dehiscence)
☐Compromised or ischemic flap or graft
☐Other___________________

☐**Hyperbaric Oxygen Therapy**

☐Osteomyelitis – Chronic Refractory
☐Delayed radiation tissue injury
___ Osteoradionecrosis
___ Soft tissue radionecrosis
___ Radiation proctitis/enteritis
___ Radiation induced hemorrhagic cystitis
☐Diabetic Foot Ulcer
☐Critical Limb Ischemia
☐Compromised skin grafts/flaps
☐Other_____________________

☐**Ostomy Care Evaluation & Treatment**

☐Colostomy
☐Ileostomy
☐Urostomy
☐Other________________

Location of Wound: ____

Referring Physician Name (Please Print):_____________________________________ Specialty: ___________________

Referring Physician Signature: ____

Phone: ____ Fax: ____

Additional Comments:____
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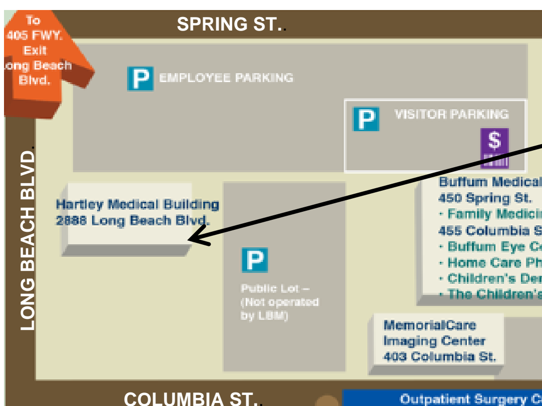
Appointment Scheduling: (562) 933-3136
Fax all orders to: (562) 933-8964



Wound Healing Center Inside of the Hartley Building

Hyperbaric Medicine Department inside Long Beach Memorial 6th Floor