



**Asthma Home Based Self-Management Referral**

**Fax Referral to 518-708-6260**

- Asthma Home Based Referral with Certified Educator Only
- Asthma Home Based & CHHA Referral:  Asthma Certified Educator  Skilled Nursing  PT  OT  RT  ST (√ all needed)

**Family Agrees to referral:  Yes  No  Would benefit from program (Provider did not ask)**

Patient Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Age dx w/ Asthma: \_\_\_\_\_

Parent/Guardian name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Home address: \_\_\_\_\_

Telephone (H): \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_

Patient/Guardian email: \_\_\_\_\_ Primary Language: \_\_\_\_\_

(P) Insurance: \_\_\_\_\_ Plan ID \_\_\_\_\_ (S) Insurance: \_\_\_\_\_ Plan ID \_\_\_\_\_

Referring Provider: \_\_\_\_\_ Office #: \_\_\_\_\_ Fax#: \_\_\_\_\_

Primary Care Provider: \_\_\_\_\_ Office #: \_\_\_\_\_ Fax #: \_\_\_\_\_

Asthma Specialist: \_\_\_\_\_ Office #: \_\_\_\_\_ Fax #: \_\_\_\_\_

**Reason for Referral (check all that apply, if known)**

- Poorly controlled, persistent Asthma
- Hospital admission for Asthma exacerbation in last 12 months
- Repeated ER or urgent care visits for Asthma in last 6 months
- Overuse of rescue medications in last 6 months
- More than one course of oral steroids in last 6 months

**Additional Reasons for Referral (check all that apply)**

- Concerns about medication adherence
- Needs help with medication administrative technique
- Needs Asthma Action Plan Developed
- Needs assistance with medication attainment

**Concerns about home environmental triggers (check all that apply)**

- Tobacco Exposure  Molds  Mice  Pollen  Roaches
- Animal Dander  Dust mites  Other \_\_\_\_\_

**Equipment Used (check all that apply)**

- Nebulizer  Spacer  Peak Flow meter

Medication Name	Dose/ Frequency	Patient have medications
_____	_____	Yes or No
_____	_____	Yes or No
_____	_____	Yes or No
_____	_____	Yes or No

Current Asthma Treatment Regimen: \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

- Successful Regimen  Unsuccessful Regimen

\_\_\_\_\_ Number of Exacerbations past 6 mths