Making a Referral to Infectious Disease

All new patient referrals are reviewed by an Infectious Disease physician prior to scheduling.

We need your assistance to provide the best consultative care for your patient.

Please include the following information in your referral:

- What specific question would you like us to answer?
- Please include the most recent clinic note addressing the issue of concern and any other related notes. Please include if the patient is currently receiving antimicrobial therapy, relevant laboratory data, and culture data.
- Has the patient been previously evaluated by an infectious disease physician for this same concern? If not at UVM Medical Center, then please include those records if possible.
- Is the patient currently being treated for this issue by another physician? Please include why you are referring to UVM Medical Center. We will also need the records by the other provider.
- If your patient needs an urgent appointment (< 96 hours), please page Curbside Attending directly through PAS to expedite this process.
- Please discuss your referral to the ID clinic with the patient prior to making the referral.
Common referrals to Infectious Disease Clinic:
For the following infections, culture or blood work can be performed at the visit, if necessary.

**Abscess/Cellulitis**
- Note detailing the current physical exam
- Culture data if any.
- Prior and/or current antibiotic treatment

**Osteomyelitis**
- Please have any prior relevant imaging uploaded to PRISM with report
- If performed, bone biopsy with pathology and culture results
- Prior medical and surgical treatments
- Underlying condition leading to osteomyelitis

**Chronic Hepatitis C Infection**
- Hepatitis C antibody
- Hepatitis C genotype and quantitative RNA
- HIV Ab
- LFTs
- CBC with differential
- INR
- Hepatitis B surface antibody, antigen, core antibody
- Hepatitis A IgG
- Liver ultrasound
- Current medication list

For the following disease processes, we will need lab results prior to scheduling the patient.

**Latent TB**
- Results of TST in millimeters or result of IGRA (Quantiferon gold)
- Chest radiograph results and image uploaded into PRISM or have the patient bring the images on a disk
- Why was testing performed?
- Current medications and any plans for immunosuppression.

**Lyme Disease**
- Antibody testing with reflex Western blot results
- Please include in your note the current symptoms the patient is experiencing.
- Is there concern for myocarditis, arthritis, or encephalitis? If yes, please include EKG, arthrocentesis results, or CSF results, if appropriate, and already completed.
- Has the patient been previously treated for Lyme disease? If yes, please include which medications and duration of treatment.

**Recurrent UTIs**
- Most recent clinic note
- What is the underlying reason for recurrent UTIs
- Prior imaging evaluating for nephrolithiasis (if performed, and if so, images uploaded to PRISM)
- Previous work up – urology referral or GYN referral
- Prior urinalysis and culture data (if not in PRISM)
- Prior treatments