



a Service of Comanche County Memorial Hospital

Phone: 580-250-5899

Fax: 580-585-5472

HOW TO MAKE A REFERRAL

Referrals can be made 24 hours a day, 7 days a week. All referrals will be processed promptly **during business hours Monday through Friday** by our dedicated case manager. We look forward to treating your Patients with the highest level of care and appreciate your choice to use The Outpatient Infusion Center at Comanche County Memorial Hospital.

STEPS TO REFER PATIENTS FOR OUTPATIENT INFUSION THERAPY:

1. Use the appropriate infusion order form, which can be found online at:
<http://www.ccmhhealth.com/infusion-services/>
2. Complete all required information or submit along with a facesheet. If you do not complete the form and the information is not present on the facesheet, you will receive a telephone call in order to obtain required information.
3. Fax the order form with all appropriate Patient information to the fax number 580-585-5472, also on the bottom of the order form.
4. Our dedicated case manager will verify pre-authorizations and insurance benefits.
5. The Patient will be called and an appointment scheduled.
6. If you desire a call back on the status of the Patient, please include your name and phone number for a call back.
7. If you have not received confirmation of the receipt of referral order within 1 business day, please contact case management at 580-250-5899.

Thank you for your referrals – CCMH Outpatient Infusion Center looks forward to treating your Patients with the highest standards for IV infusion therapy.