



Advanced Respiratory & Sleep Medicine

105 N. Bascom Ave. Suite 202, San Jose, CA 95128
P: (408) 993-1500 F: (408) 993-1521

New Patient Referral Checklist

In order to accommodate all patient referrals, please provide the following information to proceed with scheduling:

1. **Authorization form/number** for New Patient Evaluation for CPT 99204 / 99205 from Insurance Carrier
From primary care physician referring to Dr. Sharad K. Dass (HMO patients)
PCP must submit authorization for referral.
**PPO covered patients are excluded from authorization form*

2. **Advanced Respiratory & Sleep Medicine Referral Form**
Please see attached form for provider referral to be completed.

3. **Patient Medical Records**

Please include:

Patient Demographics – Insurance Card, Covid Vaccination Card, Identification
Recent progress notes
Radiology/Imaging Reports – PET/CT, MRI, Xray
Blood Work
Any special diagnostic testing

4. **Advanced Respiratory & Sleep Medicine New Patient Forms**
Please find attached forms

Please FAX all items to secured office at (408) 993-1521
EMAIL to INFO@Arsmhealth.com

Once our team receives all of the necessary documents, your request will be reviewed and a team member will contact you to schedule your appointment.
**Please be sure to notate the BEST contact number to reach you at.*

THANK YOU!