



Professional Medical Corp Order Request Form

Email submission: intake@professionalmedicalcorp.com

Fax submission: (206) 859-6990

Online: Secure, HIPAA-compliant form or upload also available on our website

If you have any questions, please contact us. **Intake Dept (206) 859-6990 / Main Office: (206) 366-9543**

REFERRAL CONTACT INFORMATION					
Agency	DSHS AAA Contracted Other:				
	<i>If DSHS:</i> Region 1 Region 2 Region 3				
Office:					
Name:					
Title:					
Phone #:					
Email:					
PATIENT INFORMATION					
Name:					
DOB:					
Height:					
Weight:					
Address:					
Phone #:					
Email:					
Currently living at:	Home		Facility		Other:
Funding Source:	Medicaid		COPES		MAC TSOA Other:
ProviderOne #:					
PHYSICIAN INFORMATION					
Name					
Phone					
INCONTINENCE SUPPLIES					
Briefs	Monthly State Limit = 200*	Quantity needed per month		Size	
Pull-Ups	Monthly State Limit = 150 *	Quantity needed per month		Size	
Pant Liners / Pads	Monthly State Limit = 200*	Quantity needed per month		Size	Discuss w/ rep
Booster Pads	Monthly State limit = 90	Quantity needed per month		Size	Discuss w/ rep
Washable Underpads	Monthly State Limit = 4**	Quantity needed per month		One Size	
Disposable Underpads	Monthly State Limit = 180**	Quantity needed per month		One Size	
Gloves	Monthly State Limit = 2 boxes of 100 ea	Quantity needed per month		Size	

*Combined total of briefs, pull-ups, and liners/pads may not exceed a combined total of 200

** Only one type of underpads may be received per month (washable or disposable)



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GENERAL NON-COVERED ITEMS			
	Incontinence Wipes		
	Bath Wipes		
	Grab Bar (Please select length)	16"	18" 32"
	Suction Grab Bar		
	Handheld Shower Spray		
	Security/Transfer Pole		
	Reacher		
	Other (please include details here or provide a link):		
LIFT CHAIR			
	Comforter Medium		
	MaxiComfort		
BATHROOM EQUIPMENT			
	Bath Stool		
	Shower Chair		
	Transfer Bench		
	Sliding Transfer Bench		
	Toilet Safety Rail		
	Toilet Safety Frame		
	Raised Toilet Seat		
	Raised Toilet Seat w/ Arms		
	Other (please include details here or provide a link):		
UROLOGICAL SUPPLIES			
	Intermittent Single Use Catheters Size:		
	Indwelling Foley Catheters Size:		
	External Condom Catheters Size:		
	Drain Bags		
COMMENTS			