

A multidisciplinary clinic dedicated to the care of children with high-risk asthma.

Inclusion criteria

We only serve children with asthma who are considered high risk and have had the following:

- 1 or more PICU asthma admissions in the past 12 months

OR

- 2 or more asthma admissions in the past 12 months

OR

- 3 or more asthma urgent care or emergency department visits in the past 12 months

If your patient doesn't meet the above criteria, they will be reflexively referred to our pulmonology specialists.

Exclusion criteria

We don't see children with the following:

- Is younger than 5 years of age

OR

- Has underlying conditions (genetic disease, dysphagia, developmental delays and/or neurologic abnormalities)

OR

- Has been seen by a pulmonologist or allergist/immunologist in the last 18 months

Use our paperless portal to send referrals! epiccarelink.cookchildrens.org

Date: _____

Patient name: _____ DOB: _____

Address: _____

Guardian name: _____

Contact numbers: Work: _____ Home: _____ Mobile: _____

Referring physician: _____

Physician phone: _____ Physician fax: _____

Primary insurance information attached

Preferred language: _____ Preferred office location: _____

Referral coordinator name: _____

Coordinator phone: _____ Coordinator fax: _____

Reason for referral

Please note the specific problem. If this is an urgent referral, please call the specialty requested.

Physician signature: _____ Date: _____

When you submit this form, please include a copy of the patient's insurance card, labs, imaging, history and patient demographics.

Cook Children's High-Risk Asthma Clinic

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Fort Worth, TX 76104

682-885-1580 phone
682-885-1090 fax

8 a.m.-5 p.m., Mon-Fri
cookchildrens.org/high-risk-asthma-clinic