

Physician Referral Information: Undiagnosed Diseases Program (UAB)

Criteria:

- Patients must be referred by a physician (i.e., self-referrals not accepted)
- Patients must have had an extensive evaluation that did not result in a diagnosis
- Condition prompting referral is causing significant impairment to quality of life
- Patients must be clinically stable (i.e., not in need of emergent evaluation and care)
- The medical condition must have had at least 6 months duration
- The UDP medical staff, upon evaluation of the patient's status, judge that the resources and expertise of the UDP offer opportunities to make a contribution towards a diagnosis beyond what has already been done

Elements in referral letter:

- Referring physician's name/institution and contact information
- Patient demographic information, including name, date of birth, drug allergies, contact information
- Patient summary directed to the UDP team, including when undiagnosed condition was first noted, how it presented, and patient's current condition
- Evidence of chronicity and persistence of signs/symptoms and/or laboratory and radiographic abnormalities for at least 6 months; nature of condition must be significant in terms of organ dysfunction, constitutional symptoms, or loss of function.
- List of treatments and medications tried and their outcomes
- List of current medications
- For pediatric patients, please provide prenatal history and birth history, growth curves, and family history.

If selected for enrollment, the referring physician and patient will be notified. At that time, further documents will be requested as needed; these may include photographs, videos, and/or imaging studies (to be sent on CD). The expectation is that the patient will be evaluated in the outpatient setting; should the patient require extensive and/or additional invasive testing that cannot be performed as an outpatient, hospital admission will be arranged.

The UDP should not be envisioned as a referral site due to lack of availability of basic diagnostic or evaluation resources to the referring physician. Similarly, the UDP should not be seen as a place for referral of patients who are acutely ill and/or unstable who require intense management in the acute setting or have already diagnosed and managed complex medical conditions. Upon diagnosis, the patient will receive management and treatment recommendations, to be coordinated in our facility and/or per the patient's local care providers, according to the needs of and resources available to each patient. Questions regarding the referral process can be directed to Carol Dahl, clinical coordinator (205.996.6583). The referring physician will be notified once the patient's status of enrollment is determined.

Referral letters containing the above elements, *if less than 30 pages*, may be faxed to: 205.975.6389 (attention: UDP). Otherwise, please mail letters or documents (and, when applicable, radiographic images on CD) to the attention of Carol Dahl, at: UAB

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