

Livera FibroScan® Referral Form

Tel: 647-221-8182

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Fax referrals to 1-855-262-3423



Patient Information

Patient name: _____

Date of birth: _____

HC#: _____ Sex: _____

Cell phone number: _____

E-mail: _____

Physician Information

Physician name: _____

Office fax: _____

Date: _____

Signature: _____

Preferred Livera location:

- | | |
|--|---|
| <input type="checkbox"/> Richmond Hill (250 Harding Blvd W.) | <input type="checkbox"/> Markham (379 Church St.) |
| <input type="checkbox"/> Richmond Hill North (13110 Yonge St.) | <input type="checkbox"/> Woodbridge (40 Innovation Dr.) |
| <input type="checkbox"/> North York (11 Newton Dr.) | <input type="checkbox"/> East York (840 Coxwell Ave.) |
| <input type="checkbox"/> North York (3910 Bathurst St.) | <input type="checkbox"/> Newmarket (535 Mulock Dr.) |
| <input type="checkbox"/> Brampton (11615 McVean Dr.) | <input type="checkbox"/> Sharon (18939 Leslie St.) |

Reason for Referral:

- | | |
|---|---|
| <input type="checkbox"/> Abnormal Liver Tests | <input type="checkbox"/> Hemochromatosis/Hyperferritinemia |
| <input type="checkbox"/> NAFLD/Fatty Liver Disease/NASH | <input type="checkbox"/> Hypertension |
| <input type="checkbox"/> ALD/Alcohol-Related Disease | <input type="checkbox"/> Diabetes |
| <input type="checkbox"/> Cirrhosis/Rule Out Cirrhosis | <input type="checkbox"/> Obesity |
| <input type="checkbox"/> Medication Risk (Methotrexate) | <input type="checkbox"/> Metabolic Dysfunction-Associated Steatotic Liver Disease (MASLD) |
| <input type="checkbox"/> AIH/Autoimmune Hepatitis | <input type="checkbox"/> Multi-Etiology |
| <input type="checkbox"/> HCV/Hepatitis C | <input type="checkbox"/> Other: |
| <input type="checkbox"/> HBV/Hepatitis B | _____ |
| <input type="checkbox"/> PBC/PSC | |

Referral for:

- Initial - FibroScan® with CAP + Result Interpretation, Patient Education, and Recommendations**
A nurse performs the FibroScan® assessment, interprets the results, discusses the results with the patient, and provides patient education to improve liver health. The results are sent to the referring doctors.
- Follow-up - FibroScan® with CAP**
A nurse performs the FibroScan® assessment and interprets the results. The results are sent to the referring doctors.

We offer direct billing with certain insurance companies.

Please attach previous FibroScan results, if available.

We will contact the patient directly to provide information about their appointment. For more information, contact us.