



4800 S Macadam Ave. Suite 306, Portland, OR 97239

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REFERRAL FOR TESTING

Referring Physician _____

Physician Signature _____

Clinic Name _____

Clinic Phone _____ Clinic Fax _____

Do you Authorize results to be released directly to this patient? Yes No

In office breath testing only: Baseline Hydrogen levels >14ppm can be indicative of improper prep and may produce unreliable samples for the entire test. If baseline hydrogen is elevated, do you want the patient to finish the test?

Yes No

ICD.10 Code(s): _____

Patient Name: _____ Date of Birth: _____

Patient Address: _____

Patient Email: _____

Patient Phone Number: _____

Payment Details

Name on Credit Card _____

Credit Card Number _____

Expiration Date _____ CVV _____

Zip Code Credit Card is Mailed To _____

Testing Requested

Eleven sample 3 hour lactulose breath test for hydrogen and methane Kit \$215

Two Sample "Spot" baseline methane (no substrate challenge) Kit \$60

Heidelberg Test (in office only) \$350