



Sending of Surgical H&Ps and Consents to Intermountain Healthcare

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Documents must be sent **no later than 9:00 pm the day before surgery**. An H&P greater than 30 days at the time of surgery will NOT be accepted.

Surgeon: _____ Surgical facility: _____

Clinic/office contact name: _____

Phone number: _____ Alt. number (back line): _____

of pages, including cover sheet: _____

- H&P and/or consents are sent **after** the patient is **registered** for surgery and a FIN# has been assigned
- If an H&P is greater than 30 days, the physician must create a new H&P using the standard requirements
- A completed fax coversheet is required for all faxes.
- Each page of a document requires the patient's name and DOB to be listed.
- Consent forms must be completed in their entirety, including all applicable signatures.
- Each document must have an iCentra patient label with the FIN#.
 - If the office does not have an iCentra label printer, the patient's FIN# must be written on the document.

Confidentiality Notice: The documents accompanying this Fax Cover Sheet contain confidential information, belonging to the sender. This information is legally privileged and intended only for the use of the individual or entity named above.

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