



Kidney Connection: A Patient Peer Mentoring Program Referral Form



Form Instructions

The dialysis facility must complete this form for each patient who wants to serve as a peer mentor or mentee. Please fax the completed form to your respective ESRD Network to <fax number here> to the attention of <name of person here>.

Facility Information			
CMS Certification Number (CCN)	Enter text here		
Facility Name	Enter text here		
ESRD Network	Select one		
First Name	Enter text here	Last Name	Enter text here
Title	<input type="checkbox"/> Facility Administrator <input type="checkbox"/> Nephrologist <input type="checkbox"/> Nurse	<input type="checkbox"/> Social Worker <input type="checkbox"/> Technician <input type="checkbox"/> Receptionist	<input type="checkbox"/> Other, please specify: Enter text here
Phone Number	Enter text here	Email Address	xyz@gmail.com

Peer Mentoring Referral			
Referral Date	Enter text here	Unique Patient Identifier (UPI)	Enter text here
Patient's First Name	Enter text here	Patient's Last Name	Enter text here
Phone Number	Enter text here	Type of Phone Line	<input type="checkbox"/> Cell <input type="checkbox"/> Land Line
Email Address	Enter text here		
Age	<input type="checkbox"/> 18–24 <input type="checkbox"/> 25–34	<input type="checkbox"/> 35–44 <input type="checkbox"/> 45–54	<input type="checkbox"/> 55–64 <input type="checkbox"/> 65+
Current Treatment Type	<input type="checkbox"/> In-center hemodialysis <input type="checkbox"/> Home hemodialysis	<input type="checkbox"/> Peritoneal dialysis (manual) <input type="checkbox"/> Peritoneal dialysis (cycler) <input type="checkbox"/> Transplant	
Preferred Language	<input type="checkbox"/> English <input type="checkbox"/> Spanish	<input type="checkbox"/> Other, please specify:	Enter text here
Communication Preferences for Mentor Program	<input type="checkbox"/> In-person (<i>when/where available</i>) <input type="checkbox"/> Telephone <input type="checkbox"/> Email <input type="checkbox"/> Facetime	<input type="checkbox"/> Google Duo (<i>app that allows face-to-face calling between Android and iOS</i>) <input type="checkbox"/> Google Hangout <input type="checkbox"/> Messenger (<i>Facebook or WhatsApp</i>) <input type="checkbox"/> Skype <input type="checkbox"/> Zoom	
Facility Mentoring	<input type="checkbox"/> Mentor <input type="checkbox"/> Mentee		
Topics of Interest	<input type="checkbox"/> New to Dialysis <input type="checkbox"/> Home Dialysis	<input type="checkbox"/> Transplant	