



ACH
**Referral
Reference
Guide**

**Updated
September
2011**

Physician Access Line: 1-800-777-7700
We Can Help With:

- **Physician to Physician Consultations;**
- **Applying for Online Access to Your Patient's Care Information: HealthPoint;**
- **Directional Help and Transfer to Appropriate Specialty for Appointments;**
- **Retrieving Reporting Information;**
- **Intake Forms and Referral Protocol Questions;**
- **Education on Available Resources for Healthcare Professionals at: www.archildrens.org;**
- **Connecting You to a Physician Liaison to Report and Resolve Issues;**
- **Providing Information about Becoming a Physician Advisory Board Member, Offering Leadership for Positive Change.**



ACH Physician Services

VITAL INFORMATION

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Service Area	Appointment Instructions (Call 1 st if # is listed.)	Appt. Center Option #	Fax #	Forms Required
Adolescent Diagnostic	501.364.4000	6	501.978.6440	Medical Only
Adolescent Medicine	501.364.4000	1	N/A	N/A
Allergy	501.364.4000	3	501.364.4370	Medical Only
Asthma-WLR	501.364.4000	6	N/A	N/A
Audiology / Listening Ctr.	501.364.4000	2	N/A	N/A
Autism – Multispecialty	501.364.4000	5	N/A	N/A
Bleeding Disorders	501.364.4000	8	501.364.6953	Medical Only
Bone Tumor	501.364.4000	8	501.364.3421	Medical Only
Brain Tumor	501.364.4000	7	N/A	N/A
Burn Plastic	501.364.4000	5	N/A	N/A
Burn Outpt Wound Clinic Acute	888.293.1839	N/A	N/A	N/A
Cardiology	501.364.4000	4	501.364.3667	Medical Only
Cardiology Consult: 501.364.1479 Mon-Fri (8am-5pm) or 501.364.1100 (After Hours and Weekends)				
Cleft Lip/Palate:				
• New Pt:	501.364.1658	N/A	N/A	N/A
• Follow up:	501.364.4000	2	501.978.6440	
Concussion Clinic	501.364.4000	1	N/A	N/A
Continuity Clinic	501.364.4000	1	N/A	N/A
Craniofacial	501.364.1448	N/A	501.364.3621	N/A
Dental	501.364.1816	N/A	N/A	N/A
Dermatology	501.364.4000	3	N/A	N/A
Diabetes	501.364.4000	6	501.978.6471	Medical Only
Dystrophinopathy	501.364.4000	8	N/A	N/A
Ear, Nose, Throat	501.364.4000	2	N/A	N/A
Eating Disorder-WLR	501.364.1849	N/A	N/A	N/A
Endocrine	501.364.4000	6	501.978.6471	Medical Only
Fitness-WLR	501.364.4000	5	N/A	N/A
Fracture	501.364.4000	8	501.364.1522	Medical Only
General Pediatric Clinic	501.364.4000	1	N/A	N/A
Genetics-WLR	501.364.4000	3	501.364.1564	Medical Only
GI and GI APN Clinic	501.364.4000	5	501.364.6291	Medical Only
Growth Hormone	501.364.4000	6	501.978.6471	Medical Only
Growth/Development	501.364.4000	5	501.364.3484	Medical Only
Gynecology	501.364.6601	N/A	N/A	N/A
Hand Injury	501.364.4000	8	501.364.1522	Medical Only
Headache -WLR	501.364.4363	N/A	N/A	N/A
Headache -Neurology	501.364.4000	7	501.364.6077	Medical Only
Hematology/Hemophilia	501.364.4000	8	501.364.4332	Medical Only
High Risk Newborn	501.364.4000	5	501.364.3560	Medical Only
Hypertension	501.364.4000	3	501.364.1780	Medical Only
Immunology	501.364.4000	3	501.364.4370	Medical Only
Infectious Disease	501.364.4000	6	501.364.3551	Medical Only
Interventional Radiology	501.364.4000	3	N/A	N/A
Latino Clinic (Complex)	501.364.4000	9	N/A	N/A
Liver Clinic	501.364.4000	5	501.364.6291	Medical Only
Medical Home Clinic	501.364.4000	5	N/A	N/A
Nephrology	501.364.4000	3	501.364.1780	Medical Only
Neurology	501.364.4000	7	501.364.6077	Medical Only
Neurosurgery	501.364.4000	7	501.364.3621	Medical Only
Newborn Follow-up	501.364.4000	1	N/A	N/A
Ophthalmology	501.364.4000	2	501.364.6846	Medical Only

For questions or access to services listed, please call a Physician Access Line (PAL) representative at 1-800-777-7700. Current Outreach schedules and Intake forms can be downloaded by going to:

<http://www.archildrens.org/Healthcare-Professionals/Information-for-Physicians/Forms.aspx>



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Optometry	501.364.4000	2	N/A	N/A
Orthopaedic (WLR/ACH)	501.364.4000	8	501.364.1522	Medical Only
Pain Medicine	501.364.4000	8	501.364.2939	Medical Only
Pal Care	501.364.4000	5	N/A	N/A
Ped Diagnostic (PDC)	501.364.4000	6	501.364.7230	Medical Only
Physical Med and Rehab	501.364.4000	8	501.364.6829	Medical Only
Plastic Surgery	501.364.4000	5	501.364.1522	Medical Only
Pulmonary	501.364.4000	6	501.364.3930	Medical Only
Rheumatology	501.364.4000	3	501.364.5339	Medical Only
Sleep Clinic	501.364.4000	2	501.364.6878	N/A
Sickle Cell	501.364.4000	8	501.364.4332	Medical Only
Speech	501.364.4000	2	N/A	N/A
Spina Bifida	501.364.4000	5	501.364.6806	Medical Only
Surgery	501.364.4000	5	N/A	N/A
TB Chest	501.364.4000	6	N/A	N/A
Urology & Urodynamics	501.364.4000	3	501.364.3960	Medical Only
Vascular Lesions	501.364.7546	N/A	501.364.1935	Medical Only
Velopharyngeal Insufficiency (VPI):				
• New:	501.364.1658	N/A	N/A	N/A
• Follow up:	501.364.4000	2		
Outpatient Testing				
Please Note: All Order Forms MUST have a physician's written signature, contact name and phone number. Thank you!				
Referred Patient Requisition Ancillary Order Form: No extra referral form is needed, when Medicaid (NPI) referral # is included.				
Apheresis	Fax Only	N/A	501.364.2283	Ancillary Order
Burn Treatment	Fax Only	N/A	501.364.6480	Ancillary Order
EEG	Fax Only (For Questions Call: 501.364.4000, Option #7)	N/A	501.978.6440	Ancillary Order
GI Lab	Fax Only	N/A	501.364.4658	Ancillary Order
Heart Station:				
• ECHO (Sed and Non)				
• EKG	501.364.4000	4	501.978.6440	Ancillary Order
• Holter Monitor				
• Event Monitor				
Cardiology Consult: 501.364.1479 Mon-Fri (8am-5pm) or 501.364.1100 (After Hours and Weekends)				
Lab-Outpatient Testing Hrs: 8am-4:30pm, Mon.-Fri. Main Hosp. Lobby to Ot/Pt Testing Desk	Fax Only Note: <u>Some</u> specimens can be mailed with Lab Req. Form to: ACH, 1 Children's Way, Slot 820, Little Rock, AR. 72202			
Newborn Screening (Confirmatory) Testing: NB Coordinator: 501.686.0005	Send form with pt for testing, or mail with specimen to ACH.	N/A	501.364.3578	Ref Pt Req Form-Lab-Newborn Testing (Order/Referral in One)
PT/OT	Fax Only		501.364.3564	Ref Pt. Req Form- Lab + (Separate Referral Form)
Pulmonary Lab			501.364.1887	
Radiology: • Bone Density • CT • Fluoroscopy • Interventional Radiology • MRI • Nuclear Medicine • Sedation Nurse • Ultrasound • X-ray	Urgent or Same day/Walk-In: Pls fax order and call to speak with Rad Tech. 501.364.1175 All Others Fax Only	N/A	501.364.3549	Ancillary Order

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Regional Outreach Clinic Schedule

To schedule regional clinics, please call: 1-800-777-7700.

	Alma	El Dorado	Ft. Smith	Harrison	Helena	Hope	Hot Springs	Jonesboro	Lowell (Centers for Children)	Marshall	Mt. Home	Mt. View	Russellville	Texarkana
Cardiology		Jan 2, May 13	Monthly	Oct 28	Feb 25, Aug 26			Monthly	Every Wed					Monthly
Cleft Lip & Palate									Monthly beginning Sept '11 exc Oct '11					
Dev Peds Intake through Dennis Dev Center	Oct 26	Sept 27, 28, Dec 13, 14			Feb 2	Nov 2	Nov 9		Perm Clinic	Oct 18	Oct 19		Oct 12	Nov 1
Dev Rehab		Nov 1						Sept 15, 16	Perm Clinic			Mar 8, Aug 26		Oct 18
Ear, Nose & Throat									Monthly beginning Oct					
Endocrine									Monthly					
GI									Oct 5, Dec 7, Feb 1, Apr 4, June 6					
Genetics									Two days / mo. Jan-Nov					
Growth & Dev									Nov 9, Feb 22, May 23, Aug 24					
Hemophilia									TBA					
Hematology									TBA					
Immunology									Oct 13, Dec 8, Feb 9, Apr 12, June 14					
Infectious Dis									Monthly beg Oct '11, exc Nov '11					
Nephrology									Monthly					
Orthopaedics									Sept 28, Dec 21, Mar 28, June 27					
Pulmonology Neuromuscular									Monthly (Wed)					
Psychiatry (Schmieding)									Jan-Oct: Twice/mo Nov 9, Dec 14					
Rheumatology									Monthly					

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