



HEALTH PLAN OF NEVADA  
A UnitedHealthcare Company

**11.6 ENDOCRINOLOGY REFERRAL GUIDELINES**  
**Contracted Group: Southwest Medical**

Southwest Medical Endocrinology Department provides consultation and treatment for diabetes, thyroid conditions, glandular diseases and other endocrine disorders in adults. Our team includes Physicians, Advanced Practice Nurses, and RN-Certified Diabetes Educators.

**4750 W. Oakey Blvd 3A**  
**Las Vegas, NV 89102**

**4475 S. Eastern #2400**  
**Las Vegas, NV 89119**

**2845 Siena Heights #351**  
**Las Vegas, NV 89052**

**Department Contact Information: Phone (702) 877- 5306 Fax (702) 560-2020**

**Referrals Information: Phone (702) 877-5240 Fax (702) 667-4600**

**Hours: 8 a.m. - 5 p.m., Monday through Friday. Closed daily 12 p.m. - 1 p.m.**  
Limited 7am appts

**Appointments are by referral only. Please allow 5-7 business days for your referral to be processed.**

**Expedited referrals require a provider to provider consult:**

**Oakey: (702) 560-2021\*, S. Eastern: (702) 650-2443\*, Siena: (702) 266-8253\***  
**\*phone numbers limited to providers only please!**

All referrals should include a specific question to be answered by the Endocrinology Department, recent labs related to the diagnosis and information on any prior treatment attempts.

**Examples of Appropriate Referrals to Endocrinology:**

- Diabetes with HbA1C greater than 9% or HbA1C between 7%-9% despite the best efforts of the PCP at controlling the blood sugars
- Diabetes requiring complex insulin regimens
- Diabetes with uncontrolled hypoglycemia or pregnancy
- Gestational Diabetes requiring management of blood sugars and insulin regimens throughout pregnancy (**Please refer member to Desert Perinatal Associates**)
- Gestational Diabetes Education (Patients should be educated on monitoring their blood sugars and be set up with meters and supplies prior to appointment). (**Please refer member to Desert Perinatal Associates**)

## 2020 HPN Provider Summary Guide

- Hyperparathyroidism (with lab work performed without patient being on a calcium supplement or thiazide diuretic)
- Hyperthyroidism with TSH, Free T4, Free T3, Thyroglobulin and Anti-Thyroglobulin (all labs to be completed within the month prior to submitting the referral)
- Hypogonadism (Male) with Testosterone and Free Testosterone completed by Equilibrium Dialysis (morning fasting), LH, Prolactin, TSH and Free T4 (all labs to be completed within the month prior to submitting the referral)
- Pituitary Disease
- Pituitary Related Amenorrhea with fasting Prolactin Level, Estradiol, FHS, LH, TSH, Free T4, fasting blood sugar and serum pregnancy test (all completed within the last month prior to submitting the referral)
- Thyroid Cancer follow up with TSH, Free T4, Thyroglobulin and Anti-Thyroglobulin (all labs completed within the 3 months prior to submitting the referral)
- Thyroid Cancer (new diagnosis) with thyroid biopsy completed prior to submitting referral
- Thyroid Nodules with thyroid ultrasound and FNA under ultrasound guidance completed prior to submitting referral

Patients with diabetes will be returned to Primary Care for glycemic management once HbA1C is at goal (<7%) or the Endocrinology provider feels that patient has achieved the best control he/she can achieve.

RN diabetes education (RN-CDE) is only offered to patients whose condition is being managed by an SMA Endocrinology provider. Endocrinology cannot accept referrals for education only.