**Nanoom Medical Group**

866 S Westmoreland Ave, #101 LA, CA 9005 Tel. 800-821-5675

**RPM ORDER FORM**

**Patient:** ()EHR ID:

**Order Information**

* ICD-10 codes: I10
* Devices Hicare Tablet [ ✔ ]

Blood Pressure Monitor [ ✔ ]

Glucose Meter [ ]

Pulse Oximeter [ ]

Weight Scale [ ]

Thermometer [ ]

**Patient Information**

* Patient Name : (Last, First)
* DOB : (MM-DD-YYYY)
* Address :
* Tel :
* Medicare # :

**Physician provided the patient regarding the Hicare RPM service and the patient understood**.



Sign:

Date: 12 / 12 / 2023