



PIRATE E-Consultation Request

1) Patient's Full Name:

2) Full Social Security #:

3) D.O.B:

4) Is this an out-of-VISN 4 Request: Yes No

5) Requesting VA Primary Care Physician:

6) Referring VA Medical Center (local / home VA treating patient):

- Patient has been diagnosed with aphasia: Yes No
- Patient is independent with activities of daily living: Yes No
- Patient is independent with medication management: Yes No
- Patient is independent with mobility: Yes No
- Patient is medically stable (including mental health diagnosis): Yes No

Please evaluate candidacy for PIRATE.

Note: Two e-consults will be generated at VISN 4 by PIRATE staff because of this consult. Our PIRATE speech-language pathologists and the MD on our PIRATE team.

Signature: _____

**Please fax this document to the attention of Mary Sullivan.

Fax # 412-360-6426