

New Patient Fax Cover Sheet

Please complete this sheet and use as your fax cover sheet when sending Twin Cities Physicians and admission paperwork (all fields must be completed).

Name of Community: _____

Room #: _____ Date Resident Expected: _____

Resident Name: _____ DOB: _____

Notes: _____

Check if patient is hospice

Please check patient type and send the related documents:

<input type="checkbox"/> TCU	<input type="checkbox"/> LTC	<input type="checkbox"/> AL	<input type="checkbox"/> IL
<u>For TCU send:</u>	<u>For LTC send:</u>	<u>For AL send:</u>	<u>For IL send:</u>
Face Sheet	Face Sheet	Face Sheet	Face Sheet
Insurance	Insurance	Insurance	Insurance
SSN	SSN	SSN	SSN
Med List	Med List	Med List	Med list
H&P	H&P	H&P	POA paperwork
D/C Summary	D/C Summary	Past 6 months of Labs	
POA Paperwork	POA paperwork	POA Paperwork	

Send Us All Information:

- By Fax: 763.312.1800
- By Email: newadmit@mytcp.org
- Questions? Call TCP Admissions: 763.951.0909
- Want this process to be easier? Call and ask about our Google Form!