

Kindly call or email for appointment date:

NKF Chronic Kidney Disease (CKD) Education Centre Referral Form (Online)

Attention to: Matron Noriah/Pn Husna, National Kidney Foundation

Phone: NKF HQ, PJ: 03-79549048 (Pn Hajar/ Pn Adilah/ Ms Yap)

Email: ckdclinic@nkf.org.my

Patient's particulars	Referring doctor
Name:	Name:
IC number:	Clinic:
Phone number:	Phone number:
	Email:

Medical histories	Please √	Indication(s) for referral (can choose more than one)	Please √
Hypertension		Uncontrolled HTN	
Diabetes mellitus		Uncontrolled DM	
Ischaemic heart disease		Lifestyle and dietary counselling	
Glomerulonephritis / SLE		Renal replacement therapy (RRT)/	
Dyslipidemia		Psychosocial counselling	
Gout		(by NKF's Counsellor)	
Others:		Others:	

Blood results:

Se creatinine: _____

eGFR: _____

Glucose: _____ (FBS / RBS)

Hb A1c: _____

Se albumin: _____

Haemoglobin: _____

Please attach with blood investigation results if available

Medications:

National Kidney Foundation of Malaysia HQ (location available in Google Map & Waze)

Address: 70, Jln 14/29, Seksyen 14, 46100 Petaling Jaya, Selangor.