Icing Smiles, Inc. Medical Eligibility Form



Parent/Guardian: If you have not completed the online application, please do so at www.lcingSmiles.org.

Medical Child's Name:	_Date of Birth:///////
Parent/Guardian Name:	
Parent/Guardian Email:	
Parent/Guardian Phone Number:	

TO BE COMPLETED BY THE MEDICAL PROVIDER:

□ The patient is eligible based on a medical condition.

Patient's Diagnosis from Eligibility Criteria Sheet: _____

The child must be afflicted with a life-threatening or life-altering medical condition of a progressive, degenerative, or malignant nature, and must be within 2 years of their most recent **active** treatment. ***For a comprehensive list of eligible diagnoses, please refer to the** *Eligibility Criteria Guidance Sheet attached.* If you feel the child is eligible based on a condition **NOT** listed in the *Eligibility Criteria Guidance Sheet,* leadership has the discretion to approve and/or deny the request.

□ The patient is eligible based on overnight hospitalizations.

The child required frequent or extended hospitalizations within the last year. {21 days or longer OR more than 6 hospitalizations in 1 year} Please provide dates:

The patient is currently qualified for hospice/palliative care.

□ The patient is NOT eligible.

Medical Provider: _____ Phone: ______ Hospital Affiliation: _____

Email Address: ____

Hospital/Clinic Address

Office Stamp or Patient Label in the box below, or a fax Cover sheet with office <u>AND</u> patient information is REQUIRED for processing!

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Signature of Physician, PA, ARNP

Date

Please call with any questions and/or return the completed form to: Phone/Text: 561-593-8314 - Email: <u>icingsmiles@icingsmiles.org</u> - Fax: 866-724-9389

Updated 11/1/2024

The conditions below automatically qualify a patient for Icing Smiles. If you have a patient that has a condition NOT listed below, AND they meet 1 of the principles for determining critical illness conditions, please note the condition without checking the box for eligibility. Icing Smiles will be reviewed on a case-by-case basis.

Disclaimer: Icing Smiles, Inc. and its leadership reserve the discretion to approve or deny any request for diagnoses not specifically listed in the *Eligibility Criteria Guidance Sheet*.

Principles for determining critical illness conditions:

- 1. Any child whose medical diagnosis requires high-risk therapy to survive.
- 2. Any child who is dependent on life-saving technology to survive.
- 3. Any child with chronic or terminal conditions, demonstrating long-term complications.
- 4. Any child who is a high risk of death that is not covered by other criteria in the list below.

Specialty	Critical Illness Conditions
Rheumatology	Autoinflammatory conditions
	Chronic vasculitis
	Juvenile dermatomyositis
	Mixed connective tissue disease with end-organ involvement
	Pediatric systemic lupus erythematous with end-organ involvement
	Polychondritis resulting in end-organ damage
	Progressive Systemic Sclerosis
	Systemic JRA/JIA with macrophage activation syndrome (MAS)
	Chronic hypoxemia requiring supplemental oxygen
	Chronic respiratory failure
	Chronic ventilator dependence
	Cystic fibrosis (ONLY with another qualifying condition)
	Lung transplant OR placement on the lung transplant list
	Moderate-severe lung disease secondary to chemotherapy and radiation
	Progressive histiocytosis, including multifocal
	Progressive interstitial lung disease associated with immunodeficiency,
	autoimmune disease, or immune dysregulation
Pulmonary	Pulmonary fibrosis
	Pulmonary graft versus host disease
	Pulmonary hypertension
	Pulmonary lymphangiectasia
	Severe respiratory compromise incompletely responsive to therapy and resulting
	in recurrent life-threatening episodes
	Surfactant protein dysfunction
	Tracheostomy placement for chronic respiratory failure or severe airway
	obstruction
	Complex Severe Bronchiectasis
Oncology	Bone marrow/stem cell transplant (within one year of transplant)
	Tumors requiring chemotherapy, radiation, or more than one major surgery,
	associated with extensive complications (within one year of completion of
	such treatment)
	Malignant neoplasms and neoplasms of unspecified or uncertain behavior
	(within one year of completion of chemotherapy treatment and/or radiation
	treatment)

Status post-bone marrow transplant with continued complications

	Alpers disease
Neurology	Cerebral palsy linked to life-threatening complications
	Congenital neuromuscular disease with respiratory or cardiac complications
	Epilepsy/uncontrolled seizures
	Familial dysautonomia
	Friedreich's ataxia
	Huntington's disease
	Leigh syndrome
	Lennox-Gastaut syndrome
	Leukodystrophy
	Moyamoya disease
	Neurodegenerative disease with significantly shortened life expectancy
	Neuronal brain iron accumulation
	Progressive cerebrovascular disease with ongoing life-threatening complications
	Profound neurodevelopmental delay with associated life-threatening
	comorbidities requiring significant and ongoing life-sustaining medical support
	Rett syndrome
	Tuberous sclerosis, involving the brain or spinal cord
	Chronic kidney disease
	Dialysis-dependent renal disease
Nephrology	Kidney transplant
	Kidney diseases dependent on long-term infusions and/or plasma exchange
	Status post kidney transplant with continued complications
	Bone marrow transplant
	Immunodeficiencies with diminished life expectancy
	Primary immunodeficiencies requiring lifelong treatment
Immunology and Infectious	Primary immunodeficiency diseases resulting in frequent unplanned
Disease	hospitalizations where infection is not well-controlled
	Severe combined immunodeficiency disease (SCID)
	Status post bone marrow with continued complications
	Wiskott-Alrich syndrome
	Aplastic anemia
	Bone marrow transplant
	Hemophagocytic lymphohistiocytosis
	Severe congenital or acquired bleeding disorders
	Severe combined immunodeficiency (SCID) with active disease or who
Hematology	received BMT/SCT
	Stem cell transplant (within one year)
	Severe congenital or acquired blood cell disorders requiring chemotherapy
	treatment or involve serious complications
	Sickle cell disease (Hb-SS, Hb-SC) or thalassemia with severe or chronic
	complications
Genetic Disorders	Barth syndrome
	Congenital anomaly, chromosomal, or single gene condition with associated
	life-threatening complications
	Skeletal dysplasias or dysostoses with chronic or degenerative pulmonary
	complications
	Trisomy 13 and 18

	Bowel/intestinal transplant
	Chronic progressive liver disease with decompensation
	Hepatopulmonary syndrome
	Inflammatory bowel disease resulting in short gut disease with prolonged
	parenteral support, or complications resulting from immunosuppressive therapy
Gastroenterology	or surgery
	Liver failure
Custiconterotogy	Liver transplantation
	Malignancy or inherited premalignant conditions
	Portal hypertension
	Short bowel syndrome or intestinal failure requiring prolonged parenteral (TPN)
	support Status post liver transplant with continued complications
	Disorder of glycosaminoglycan metabolism
	Disorder of urea cycle metabolism
	Fabry (Anderson) disease
	Gaucher disease
	Hyperinsulinism with persistent hypoglycemia after pancreatectomy
	Krabbe disease
	Lesch-Nyhan syndrome
	Maple syrup urine disease
	Metachromatic leukodystrophy
Endocrinology and	Multiple endocrine neoplasia syndromes with evidence of cancer
Metabolic Conditions	Niemann-Pick disease
	Panhypopituitarism requiring hormone replacement with hydrocortisone and/or
	desmopressin
	Peroxisomal disorder
	Prader-Willi syndrome with comorbidities
	Sphingolipidosis
	Tay-Sachs disease
	Thyroid cancer requiring chemotherapy or radiation (within 1 year of
	completing chemotherapy treatment and/or radiation)
	X-linked adrenoleukodystrophy
	Complex congenital heart disease: Aortic Atresia, Double Inlet Left Ventricle,
	HLHS/HRHS, Mitral Atresia, Single Ventricle, or Tricuspid Atresia ONLY
	Congestive heart failure
	Hypertrophic, restrictive, and/or arrhythmogenic right ventricular
Cardiology	cardiomyopathy (ARVC)
	Implanted cardiac defibrillator
	Implanted ventricular assist device
	Left ventricular heart failure
	Long QT syndrome
	Necessary frequent hospitalizations after repair of a congenital heart defect
	(routine studies are not included)
	Placement on the heart transplant list
	Pulmonary arterial hypertension
	Recipient of a heart or heart-lung transplant
	Status post Fontan procedure
	Tetrology of Fallot with pulmonary atresia and major aortopulmonary collaterals
	Ventricular fibrillation