



Seracal ordering information



Using the contact information below, please submit completed forms to Pentec Health along with other required documentation, including insurance information (front and back of insurance cards), growth charts/weight trends, and recent clinical notes.



Email

orders@vytalapatientsservices.com



eFax

866-869-9442



Please note the option to use a Word document for the letter of medical necessity using this link:
myseracal.com/LetterMedicalNecessity

[MySeracal.com](https://myseracal.com)

info@vytalahealth.com

Seracal™ Written Order



Phone: 888-639-2110
eFax: 866-869-9442
Email: orders@vytalapatientsservices.com

Referral Date: _____
Clinic Contact: _____
Phone: _____ Email: _____

Patient Detail Information attached (growth charts/weight trends, clinical notes, LMN)

| | | | | | |
|-------------------------|---|--|--------------|-----------------|-----------------|
| Name _____ | | Parent or Legal Guardian, where applicable _____ | | Allergies _____ | |
| DOB _____ | Sex <input type="checkbox"/> M <input type="checkbox"/> F | Weight _____ | lbs kg _____ | Height _____ | inches cm _____ |
| Street Address _____ | | City _____ | | State _____ | Zip Code _____ |
| Emergency contact _____ | | Relationship _____ | | Phone _____ | |

Insurance Detail Information attached (including front & back of insurance cards)

| | | |
|---------------------------|-----------------------|--------------|
| Primary Plan Name _____ | Subscriber Name _____ | DOB: _____ |
| ID #: _____ | Group #: _____ | Phone: _____ |
| Secondary Plan Name _____ | Subscriber Name _____ | DOB: _____ |
| ID #: _____ | Group #: _____ | Phone: _____ |

Prescriber Detail

Prescriber Name: _____ NPI: _____ License #: _____

Preferred Communication Method: Phone Fax Email Address: _____

Phone: _____ Fax: _____ Email: _____

Diagnosis (Select all that apply)

- | | | |
|--|--|---------------------------------------|
| E44.0 Protein-calorie malnutrition of mild and moderate degree | K50.90 Crohn's disease | K90.829 Short bowel syndrome |
| E63.0 Essential fatty acid (EFA) deficiency | K85.90 Acute pancreatitis without necrosis or infection, unspecified | K90.89 Other Intestinal malabsorption |
| E63.9 Unspecified nutrient deficiency | K86.1 Other chronic pancreatitis | R62.51 Failure to thrive (child) |
| E84.0 - Cystic fibrosis with pulmonary manifestations | K86.81 Exocrine pancreatic insufficiency | R62.7 Failure to thrive (adult) |
| E84.9 - Cystic fibrosis, unspecified | K90.0 - Celiac disease | C25.9 Malignant neoplasm of pancreas |
| K58.0 - Irritable bowel syndrome with diarrhea | | Other: _____ |

Order

| | | | |
|--|--------------------|--------------------------|----------------------------|
| Application: Oral Tube Feeding | Patient Age | Servings per Day | Packages per Month |
| Dispense Seracal™ 202 gram package (15 doses) at amount indicated to right. 1 dose is 13.4g. | <12 years | 2 (13.4g) servings daily | 4 |
| | ≥12 years | 3 (13.4g) servings daily | 6 |
| Refill up to 12 times for 1 year. | | _____ servings daily | _____ total packages/month |

I certify that the use of the indicated treatment is medically necessary and I will be supervising the patient's treatment. Pentec Health may contact this patient for purposes of completing the referral process. _____ Date: _____
Digital Prescriber Signature

Confidential Health Information: This document may contain Protected Health Information (PHI), as defined by the federal HIPAA Privacy Rule (45 C.F.R. Part 160 and Part 164, Subpart E). It is being faxed to you after receiving appropriate Individual authorization or under circumstances that do not require Individual authorization. You are obligated to maintain it in a safe, secure, and confidential manner. Re-disclosure of this information is prohibited unless permitted by law or appropriate Individual authorization is obtained. Unauthorized re-disclosure or failure to maintain confidentiality could subject you to penalties described in federal and/or state laws and regulations.

Important warning: This message is intended for the use of the person or entity to whom it is addressed and may contain information that is privileged and confidential, the disclosure of which is governed by applicable law. If the reader of this message is not the intended recipient, or the employee or agent responsible for delivering it to the intended recipient, you are hereby notified that any dissemination, distribution, or copying of this information is strictly prohibited. If you have received this message in error, please notify us immediately. Brand names are the property of their respective owners.

From:

Date:

NPI:

Re:

To:

SUBJECT: Medical Necessity for Seracal™

To Whom It May Concern:

I am requesting medical necessity approval for my patient for whom I have prescribed the use of **SERACAL**, a powdered medical food indicated for the dietary management of patients who suffer from malabsorption. **Based on my patient's clinical history, I have determined that this product is medically necessary.**

Patient name:

Date of birth:

My patient's clinical information is as follows:

Height (inches or centimeters):

Weight (pounds or kilograms):

Current body mass index (BMI; kg/m²):

My patient has been diagnosed with (condition[s]):

Their malnutrition is manifested by a weight loss of (pounds or kilograms/%):

Their weight loss has occurred over a period of (duration of weight loss):

Please see attached weight history/growth chart, as well as other key nutritional metrics or nutrition therapy history, if relevant.

SERACAL is a medical food¹ that supplements healthy, long-chain fats and calories that also helps boost the absorption of fat and fat-soluble vitamins from other foods consumed, leading to the improved absorption and resulting blood values of essential fatty acids (EFAs), choline, and vitamins A and K.² It is specifically formulated and indicated for patients with a multitude of diseases where fat malabsorption is present. **SERACAL** also helps patients who struggle to gain and maintain weight, height and BMI. Fat malabsorption can lead to patients experiencing gas, bloating, chronic diarrhea,

steatorrhea, abdominal pain and unintentional weight loss.³ Left unmanaged, fat malabsorption can lead to poor health outcomes including malnutrition due to weight loss, failure to thrive, fat-soluble vitamin deficiencies (which can lead to bone disease³) or essential fatty acid deficiencies (EFAD).^{4,5} The use of **SERACAL** can help alleviate these symptoms and reduce the incidence of these poor outcomes.²

SERACAL contains a primary energy source of fat and carbohydrate. **SERACAL** can be mixed into foods without altering taste or texture and can be mixed with water to flush down a feeding tube. It contains a pre-digested long chain fat complex that, once in the gut will also help increase absorption of fat-soluble nutrients from other foods the patient is consuming, enabling patients to reach and maintain a healthy weight, height, and BMI.²

I appreciate your consideration of this request. Your authorization of this prescribed medical food will have a positive impact on my patient's health. Please feel free to contact me if you have additional questions.

Sincerely,

Prescriber Signature: _____

Name: _____

Institution/Practice: _____

Enclosures:

References:

1. A medical food, as defined in section 5(b)(3) of the Orphan Drug Act (21 U.S.C. 360ee(b)(3)), is "a food which is formulated to be consumed or administered enterally under the supervision of a physician and which is intended for the specific dietary management of a disease or condition for which distinctive nutritional requirements, based on recognized scientific principles, are established by medical evaluation." Frequently Asked Questions About Medical Foods; Second Edition Guidance for Industry. U.S. Department of Health and Human Services Food and Drug Administration Center for Food Safety and Applied Nutrition. May 2016.
2. Stallings VA, et al. Effect of oral lipid matrix supplement on fat absorption in cystic fibrosis: a randomized placebo-controlled trial. *J Pediatr Gastroenterol Nutr.* 2016;63(6):676–680.
3. Omer E, Chiodi C. Fat digestion and absorption: normal physiology and pathophysiology of malabsorption, including diagnostic testing. *Nutr Clin Pract.* 2024;39:S6-S16.
4. Hirsch TI, Wang SZ, Fligor SC, et al. Fat malabsorption in short bowel syndrome: a review of pathophysiology and management. *Nutr Clin Pract.* 2024;39:S17-S28.
5. Min M, Patel B, Han S, et al. Exocrine pancreatic insufficiency and malnutrition in chronic pancreatitis. Identification, treatment, and consequences. *Pancreas.* 2018;47(8):1015-1018.