



8375 Lundy's Lane, Unit 100, Niagara Falls, ON L2H 1H5

Phone: 289-477-0171 Fax: 1-855-274-7729

Date: \_\_\_\_\_

## REFERRAL FORM

### PATIENT INFORMATION

First Name:

Last Name:

Health Card No.:

DOB:

Gender: ☐ Male ☐ Female

Daytime Phone:

Evening Phone:

Email:

Address:

### PHYSICIAN INFORMATION

Referring Physician:

Address:

Physician Billing No.:

Phone:

Fax:

### CONSULTANTS

- Dr. Segal, Dan (GI)
- Dr. Malhotra, Neel (GI)
- Dr. Liu, Eddie (GI)
- Dr. Umair Masood
- Dr. Zaid Hindi
- Dr. Howatt, Neil (GS)
- Dr. Ryan Fielding
- Dr. Anant Subramanian
- Dr. Nouman Hassan

## REASON FOR REFERRAL

### GASTROSCOPY ☐

- ☐ Anemia
- ☐ Dysphagia
- ☐ Reflux Symptoms (GERD)
- ☐ Nausea
- ☐ Weight Loss
- ☐ Abdominal Pain

### COLONOSCOPY ☐

- ☐ Anemia
- ☐ History of Polyps
- ☐ Bloating/Gas Flatulence
- ☐ Rectal Bleeding
- ☐ Family HX Colon CA
- ☐ Screening

☐ Weight Loss

☐ Diarrhea

☐ \_\_\_\_\_

### BOTH PROCEDURES ☐

Last Colonoscopy: \_\_\_\_\_

## MEDICAL HISTORY

- ☐ Hx of Adverse Reaction to Sedation/Anesthesia
- ☐ Diabetes Mellitus
- ☐ Allergies

- ☐ Patient Uses Prophylactic Antibiotics
- ☐ Prosthetic Heart Valve
- ☐ Abnormal Renal Function

Doctor Remarks: \_\_\_\_\_

## MEDICATIONS

Blood Thinners ☐ Aspirin ☐ Plavix ☐ Warfarin/Coumadin ☐ Insulin ☐

List All Medications: \_\_\_\_\_

### EXCLUSION CRITERIA – PLEASE DO NOT REFER PATIENT TO CANMED NIAGARA IF ANY APPLY TO THE PATIENT:

- |                 |   |  |  |
|-----------------|---|--|--|
| Cardiovascular: | <input type="checkbox"/> Recent MI <6 Months Or Unstable Angina | <input type="checkbox"/> CHF                           | <input type="checkbox"/> Morbid Obesity (BMI>40) |
| Pulmonary:      | <input type="checkbox"/> Severe COPD/Emphysema (On Home O2)     | <input type="checkbox"/> Severe Sleep Apnea (CPAP)     | <input type="checkbox"/> Age Above 79            |
| GI/Liver:       | <input type="checkbox"/> Brisk GI Bleeding/Melena               | <input type="checkbox"/> Decompensated Liver Disease   | <input type="checkbox"/> PE/DVT <6 Months        |
| Other:          | <input type="checkbox"/> Current Pregnancy                      | <input type="checkbox"/> Non-Ambulatory Patient        | <input type="checkbox"/> Obstructive             |
| Renal:          | <input type="checkbox"/> Dialysis Patient                       | <input type="checkbox"/> Severe Valvular Heart Disease | <input type="checkbox"/> Jaundice/Cholangitis    |



### **Patient Information Card**

You have been referred to CenMed Endoscopy for a scope (Colonoscopy or Gastroscopy).

Please make sure you call to follow up and arrange your appointment. They are a private office that is not affiliated with the ED or Niagara Health. Make sure you follow up with your Family Doctor for further care.

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For Map Direction, scan below with your smartphone:



If you do not have a family doctor, scan below with your smartphone:

