

AMBULATORY GERIATRIC SERVICES COMMON REFERRAL FORM

Name of Client: _____ M F
Surname First Name

Address: _____ **ON** _____
Street Name and Number Apt. City Prov Postal Code

Tel #: _____ **Lives Alone?** Yes No **Marital Status:** _____

Health Card #: ____/____/____ **DOB:** ____/____/____
Version Code dd/mm/yy

Alternate Contact: _____ **Relationship:** _____ **Tel #:** _____

Contact Person for Booking Appointment: _____ **Translator required?** Yes No
Language

Is client/substitute decision maker aware of referral? Yes No **Is patient homebound?** Yes No

Is CCAC involved? Yes No Unsure **If yes, Case Manager name:** _____ **Tel #:** _____

<p>REASON(S) FOR REFERRAL <i>(Check all that apply)</i></p> <p><input type="checkbox"/> Medical / Physical</p> <ul style="list-style-type: none"> <input type="checkbox"/> Mobility <input type="checkbox"/> Falls <input type="checkbox"/> Incontinence <input type="checkbox"/> Pain management <input type="checkbox"/> Medication / polypharmacy <input type="checkbox"/> Sleep <input type="checkbox"/> Weight loss / nutrition <p><input type="checkbox"/> Cognitive / Behavioural</p> <ul style="list-style-type: none"> <input type="checkbox"/> Delirium <input type="checkbox"/> Verbal / physical aggression <input type="checkbox"/> Cognition / dementia <input type="checkbox"/> Delusions / hallucinations <input type="checkbox"/> Depression <input type="checkbox"/> Wandering <p><input type="checkbox"/> Psychosocial</p> <ul style="list-style-type: none"> <input type="checkbox"/> Caregiver / family issues <input type="checkbox"/> Elder abuse <input type="checkbox"/> Social isolation <p><input type="checkbox"/> Functional</p> <ul style="list-style-type: none"> <input type="checkbox"/> ADL/IADL decline <input type="checkbox"/> Home safety <p><input type="checkbox"/> Other <i>(please specify):</i> _____</p>	<p>MEDICAL INFORMATION</p> <p>Main Concern(s) to be addressed:</p> <div style="border: 1px solid black; height: 60px; margin-bottom: 5px;"></div> <p>Medical History <input type="checkbox"/> Documentation/notes attached</p> <div style="border: 1px solid black; height: 60px; margin-bottom: 5px;"></div> <p>Medical History <input type="checkbox"/> Documentation/notes attached</p> <div style="border: 1px solid black; height: 60px;"></div>
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Name of Family MD: _____ **Tel #** _____ **Fax #** _____

Referring Source: _____ **Tel #** _____

Name of Referring Physician _____ **Tel #** _____ **Fax #** _____

Signature of Referral Physician *(if applicable)* _____ **Billing #** _____ **Date:** _____

Services Requested: _____

Hospital Requested: _____

Fax to a provider listed on the following pages.

Revised: June 9, 2015

RGP Geriatric Ambulatory Service Contact List

HOSPITALS	GERIATRIC OUTREACH SERVICES	GERIATRIC DAY HOSPITALS	GERIATRIC OUTPATIENT CLINICS	OTHER OUTPATIENT SERVICES
Baycrest	T: 416 785-2488 F: 416 785-2409	Wellness Path Program T: 416-785-2500 Ext. 2588 F: 416-785-2409	Geriatric Assessment Clinic T: 416-785-2500 Ext. 2636 F: 416-785-2370 or 416-785-4226	Psychogeriatric Services T: 416-785-2500 Ext. 2730 F: 416-785-2492
Humber River Hospital	Geriatric Outreach Team T: 416-242-1000 Ext. 21817 / 21818 F: 416-242-1108 Geriatric Mental Health Outreach Team (LTC homes specified by the LHIN NYGH and all LTC's covered by HRH) T: 416-242-1000 Ext. 43097		Healthy Living Clinic T: 416-242-1000 Ext. 21817 / 21800 F: 416-242-1108	
Lakeridge Health Corporation			GAIN Clinic T: 905-576-8711 Ext. 4832 F: 905-743-5311	
Mackenzie Health Richmond Hill Hospital	Geriatric Outreach Team T: 905-883-1212 Ext. 3895 F: 905-883-2016		Seniors Wellness Clinic T: 905-883-1212 Ext. 3889 F: 905-883-2181 Psychogeriatric Assessment Service T: 905-883-1212 Ext. 3361 F: 905-883-2139	
Markham Stouffville Hospital			Seniors Health Clinic T: 905-472-7000 Ext. 7601 F: 905-472-7621	
Michael Garron Hospital Toronto East Health Network			Geriatric Clinic T: 416-469-6031 F: 416-469-6458	Psychogeriatric Services T: 416-469-6580 Ext. 6319 F: 416-469-6805
North York General Hospital	Geriatric Medicine & Geriatric Psychiatry T: 416-756-6050 Ext. 8060 F: 416-756-3144	T: 416 756-6050 Ext 8060 F: 416 756-3144	Geriatric Memory Clinics T: 416 756-6050 Ext. 8060 F: 416 756-3144	Parkinson Clinic/Parkinson Education Program & Osteoporosis Program T: 416-756-6050 Ext 8060 F: 416-756-3144
Ontario Shores Centre for Mental Health Sciences	F: 905-430-4000		Geriatric Memory Clinic T: 905-668-2975 Ext. 226 Geriatric Mood Clinic F: 905-430-4000	
Orillia Soldiers Memorial Hospital		T: 705-325-2201 Ext. 3850 F: 705-330-3211		Geriatrician & Geriatric Psychiatry consultation via Telehealth T: 705-325-2201 Ext. 3850 / F: 705-330-3211 Integrated Regional Falls Program T: 705-325-2201 Ext. 3851 / F: 705-330-3205
Providence Healthcare	Community Outreach Medication Management Service T: 416-285-3665 F: 416-285-3663		Geriatric Medicine Clinic Geriatric Psychiatry Clinic T: 416-285-3665 F: 416-285-3663	Frailty Intervention Team (FIT) T: 416-285-3665 / F: 416-285-3663 Falls Prevention Clinic (Use GTA Rehab Network <i>Outpatient/Ambulatory Rehab Referral Form</i>) T: 416-285-3744 / F: 416-285-3759

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Rouge Valley Health System Centenary Site			GAIN Clinic T: 416-281-7446 F: 416-281-7082	Care After the Care in Hospital (CATCH) Centenary Site – T: 416-284-8131 Ext. 2120 F: 416-281-7224 Ajax/Pickering Site T: 905-683-2320 Ext. 5123 F: 905-428-5204 Psychogeriatric Outreach T: 416-284-8131 Ext. 5241 / F: 416-281-7320
Royal Victoria Regional Health Centre			Urgent Geriatric Clinic T: 705-728-9090 Ext. 47378	
Sinai Health System			Geriatric Medicine Clinic T: 416-586-4800 Ext. 8563 F: 416-586-3168 Geriatric Psychiatry Outpatient Assessment Clinic T: 416-586-4800 Ext. 5192 F: 416-586-3231	Wellness Centre – Community Mental Health Program for Seniors & Caregivers T: 416-291-3883 Reitman Centre CARERS Program T: 416-586-4800 Ext. 5882
Southeast / Unionville Home	T: 905-201-3389 F: 905-201-5580			
Southlake Regional Health Centre	T: 905-895-4521 Ext. 6317 F: 905-853-2222		T: 905-895-4521 Ext. 6317 F: 905-853-2222	
St. Joseph's Health Centre			Elderly Community Health Centre Geriatric Clinic T: 416-530-6043	
St. Michael's Hospital			Geriatric Assessment Clinic T: 416-864-5015 F: 416-864-5735	Memory Disorders Clinic T: 416-864-5015 Psychogeriatric Clinic T: 416-864-5320 / F: 416-864-5480
Sunnybrook Health Sciences Centre	T: 416-480-6888 F: 416-480-4778	T: 416-480-6888 F: 416-480-4778	Geriatric Assessment Clinic T: 416-480-6888 F: 416-480-4778	Falls Prevention Program T: 416-480-6888 F: 416-480-4778
The Scarborough Hospital	GAIN Outreach T: 416-847-8941 F: 416-847-8942 T: 416-493-3333 Ext. 311 F: 416-352-5086		GAIN Clinic (General Site) T: 416-431-8200 Ext. 6355 F: 416-289-2961	
Trillium Health Partners (serving the Mississauga Halton LHIN catchment area)	T: 416-521-4090 or 1-888-271-2742 F: 416-521-4116		Seniors' Health Clinic T: 416-521-4090 or 1-888-271-2742 / F: 416-521-4116	Seniors' Mental Health Services T: 416-521-4006 / F: 416-521-4020 Falls T: 416-521-4090 or 1-888-271-2742 F: 416-521-4116

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HOSPITALS	GERIATRIC OUTREACH SERVICES	GERIATRIC DAY HOSPITAL	GERIATRIC OUTPATIENT CLINICS	OTHER OUTPATIENT SERVICES
University Health Network - Toronto General - Toronto Western				Memory Clinic (Toronto Western Site) T: 416-603-5232 / F: 416-603-6402 Late Life Affective Disorders Clinic (Toronto General Site) T: 416-603-5800 Ext. 6508 F: 416-603-5368
University Health Network - Toronto Rehabilitation Institute	T: 416-597-3422 Ext. 3830 F: 416-597-7066	T: 416-597-3422 Ext. 3065 F: 416-597-7066	Geriatric Assessment Clinic T: 416-597-3422 Ext. 3065 F: 416-597-7066	Falls Clinic T: 416-597-3422 Ext. 3065 F: 416-597-7066
West Park Healthcare Centre	Geriatric Assess and Restore T: 416-243-3600 Ext. 4412 F: 416-243-3735		Geriatric Assess and Restore T: 416-243-3600 Ext. 4412 F: 416-243-3735	Seniors Mental Health Services T: 416-243-3732 F: 416-243-3735
William Osler Health System	T: 905-863-2573 F: 905-863-2545		Seniors' Wellness Clinics T: 905-863-2551 F: 905-863-2474	Geriatric Mental Health Outpatient Clinic T: 905-494-2120 Ext. 29242 F: 905-863-2472
Women's College Hospital			Wellness for Independent Seniors (WISE) Outpatient Clinic T: 416-323-6400 Ext. 8092 F: 416-323-7324	