



REFERRAL FORM

SPECIALTY

Allergy and Immunology

- ☐ Dr. Manstein Kan (MSP 67297)
☐ Dr. Raymond Mak (MSP 62592)
☐ First Available (locum)

Cardiology

- ☐ Dr. Siu Him Chan (MSP 67106)
☐ Dr. Michael Luong (MSP 66738)
☐ Dr. Petsy So (MSP 82912)

Geriatrics

- ☐ Dr. Brian Fan (MSP 44371)

General Internal Medicine

- ☐ Dr. Casey Chan (MSP 31148)
☐ Dr. Peter Ling (MSP 66091)
☐ Dr. Swetha Sriram (MSP 68696)
☐ First available

Hepatitis B & C

- ☐ Dr. Luke McLaughlin (MSP 31039)
☐ Dr. Patrick Wong (MSP 66728)
☐ Dr. Davie Wong (MSP 67996)
☐ First available

Infectious Diseases

- ☐ Dr. Luke McLaughlin (MSP 31039)
☐ Dr. Davie Wong (MSP 67996)
☐ First available

Respirology

- ☐ Dr. Stephanie Tsang (MSP 67209)

Rheumatology

- ☐ Dr. Anthony So (MSP 59386)

Centrio Clinics

☐ **Diabetes Clinic** - Run by Dr. Peter Ling
& Diabetes Nurse

☐ **Cardiovascular Diabetes**

Optimization Clinic - Run by Dr. Peter
Ling, Dr. Siu Him Chan & Diabetes
Nurse

Please fax to 778.379.9325

PATIENT INFORMATION

Name _____ Date of Birth _____

Address _____

Phone Number _____

PHN _____ Gender ☐ F ☐ M

Email Address _____

Reason for Referral (Please attach relevant investigations)

☐ Routine ☐ Urgent

For Cardiology Referrals:

☐ Consult

☐ Stress Test Only ☐ Holter Only ☐ Event Monitor
Only

Diagnostics Referrals:

☐ Ambulatory Blood Pressure Only

Referring Physician Information:

Name _____

MSP _____