



# Patient Referral Form

Barrie  Bayview  Brampton  Downtown  Etobicoke  Oakville  Scarborough  Vaughan

**Patient Name:** \_\_\_\_\_ **DOB:** \_\_\_\_\_  
(first name) (last name) (dd/mm/yyyy)

**Health #:** \_\_\_\_\_ **Version Code:** \_\_\_\_\_ **Uninsured Specify:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
(number) (street name) (unit)  
\_\_\_\_\_  
(city) (postal code) (e-mail address - required)  
\_\_\_\_\_  
(mobile # - Required) (home #) (work # with extension)

**Language:** \_\_\_\_\_  
LMC uses an English automated phone message system. If preferred spoken language is different, please specify.

- Consultation & shared care
- Diabetes Education only
- Optometry Consultation
- Consultation only
- Canadian Diabetes Prevention Program (CDPP)
- Weight Management Program (*Downtown only*)
- Chiroprody Assessment

DIABETES/ENDOCRINOLOGY PLEASE SPECIFY:	The following investigations would be helpful:
<input type="radio"/> Diabetes <input type="radio"/> Type 1 <input type="radio"/> Type 2 <input type="radio"/> GDM	<input type="radio"/> FPG, A1C, Lipids, Renal Function, uACR
<input type="radio"/> Newly Diagnosed Diabetes Rapid Triage (1-2 weeks)	<input type="radio"/> FPG, A1C, Lipids, Renal Function, uACR
<input type="radio"/> Thyroid	<input type="radio"/> Thyroid function, Relevant imaging
<input type="radio"/> Osteoporosis	<input type="radio"/> BMD report <2 years, other relevant labs
<input type="radio"/> Lipids	<input type="radio"/> TC, LDL, HDL (<3 months), A1C
<input type="radio"/> PCOS	<input type="radio"/> LH, FSH, estrogen, testosterone, A1C
<input type="radio"/> Other (please specify): _____	
<input type="radio"/> Routine: _____	
<input type="radio"/> Urgent*: _____	
* Expect a 4 business day delay in processing referrals. If an assessment is required sooner, we recommend directing your patient to the nearest Emergency Department, or alternatively, try contacting one of our endocrinologists directly.	

**Notes:** \_\_\_\_\_ **Current Medications:** \_\_\_\_\_

**Referred By:** \_\_\_\_\_ **Physician Billing #:** \_\_\_\_\_

**Physician Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

# Our Locations

	FAIRVIEW RD	N↑
HIGHWAY 400	LMC	BIG BAY POINT RD
		MAPLEVIEW DR
		TIM HORTONS

**LMC BARRIE**  
 370 Bayview Drive  
 Suite 110  
 Barrie, ON L4N 8Y2  
 T 705.737.0830  
 F 1.877.562.2778

		N↑
BOVAIRD DR E	LMC	AIRPORT RD
LA FITNESS		

**LMC BRAMPTON**  
 2979 Bovaird Drive E  
 Brampton, ON L6S 0C6  
 T 905.595.0560  
 F 1.877.562.2778

	LMC	N↑
BAYVIEW AVE		KILGOUR RD
		EGLINTON AVE

**LMC BAYVIEW**  
 1929 Bayview Avenue  
 Suite 107  
 Toronto, ON M4G 3E8  
 T 416.645.2929  
 F 1.877.562.2778

	EDWARD ST	N↑
UNIVERSITY AVE	LMC	BAY ST
CENTRE AVE		
	DUNDAS ST W	

**LMC DOWNTOWN TORONTO**  
 123 Edward Street, Suite 1500  
 Toronto, ON M5G 0A8  
 T 416.237.0104  
 F 1.877.562.2778

		N↑
KIPLING AVE	LMC	DIXON RD
		NORTHCREST RD

**LMC ETOBICOKE**  
 1723 Kipling Avenue  
 Suite 2B  
 Etobicoke, ON M9R 4E1  
 T 416.645.1035  
 F 1.877.562.2778

		N↑
HOSPITAL GATE	LMC	THIRD LINE
	H	
	DUNDAS ST	

**LMC OAKVILLE**  
 3075 Hospital Gate  
 Suite 301  
 Oakville, ON L6M 1M1  
 T 905.337.0040  
 F 1.877.562.2778

	VICEROY RD	N↑
FUTURITY GATE	LMC	DUFFERIN ST
	VALUE VILLAGE	
	STEELES AVE	REAL CANADIAN SUPERSTORE

**LMC VAUGHAN**  
 1600 Steeles Avenue W  
 Unit 5  
 Vaughan, ON L4K 3B9  
 T 905.763.8660  
 F 1.877.562.2778

		N↑
WARDEN AVE	LMC	ONTARIO 401 EXPRESS
	HOME DEPOT	
	ELLESMERE RD	

**LMC SCARBOROUGH**  
 520 Ellesmere Road  
 Suite 214  
 Scarborough, ON M1R 0B1  
 T 647.695.3866  
 F 1.877.562.2778