

Musculoskeletal Central Intake

North Simcoe Muskoka

Hip & Knee Arthritis

Phone (705) 735-0239

Toll Free Fax (866) 449-0994 – Referrals Only

Fax (705) 792-3329 – Referrals Only

REFERRAL DATE: (YYYY/MM/DD)

REFERRING PHYSICIAN:

Physician Name: _____

Address: _____

City: _____ Postal Code: _____

Phone: _____

Fax: _____

Physician Billing #: _____

Signature: _____

PATIENT INFORMATION:

Patient Name: _____

DOB: (YYYY/MM/DD) Gender: _____

Address: _____

City: _____ Postal Code: _____

Phone: _____

HCN: _____

WSIB #: _____

CONSULT OPTIONS:

- Next available assessment within North Simcoe Muskoka LHIN or,
- Preferred Clinic Location:
 - Collingwood General and Marine Hospital
 - Orillia Soldiers' Memorial Hospital
 - Royal Victoria Regional Health Centre
- Preferred Surgeon: _____

REASON FOR REFERRAL:

Moderate to severe arthritis

Knee: Right Left Bilateral

Hip: Right Left Bilateral

IMAGING INSTRUCTIONS:

X-ray report of the affected joint must be attached

If no x-ray is available from within 6 months, we recommend the following views:

Knee: AP standing / lateral / skyline / tunnel (30° flexion in standing)

Hip: AP Hip / AP Pelvis / Cross table lateral of affected hip

Patients are required to bring their x-ray disc with them to their appointment.

Please attach any other relevant imaging.

In the setting of osteoarthritis, MRI is not usually further contributory.

TREATMENTS TO DATE: (check all that apply)

- | | | | |
|--|---|--|--|
| <input type="checkbox"/> Acetaminophen | <input type="checkbox"/> Steroid Injections | <input type="checkbox"/> Physiotherapy | <input type="checkbox"/> Walking Aids |
| <input type="checkbox"/> NSAID/COXIB | <input type="checkbox"/> Viscosupplementation | <input type="checkbox"/> Exercise | <input type="checkbox"/> Braces |
| <input type="checkbox"/> Opioids | <input type="checkbox"/> Weight Loss | <input type="checkbox"/> GLA:D Canada | <input type="checkbox"/> Smoking Cessation |

MEDICATIONS AND MEDICAL HISTORY:

Please attach relevant medical history or cumulative patient profile (medications, co-morbidities, allergies, surgeries, etc.)

Clinic use only:

Received:

Reviewed:

