



CKHA- OP

Referral and Treatment Plan

- Chatham Site, Sarnia Site, Windsor Site with contact info

Community, Hospital, Alternative Contact for Patient, Relationship, Phone

Patient Demographics: Patient Name, DOB, HCN, VC, Address/911, City, PC, Phone

Medical Orders section: Patient Agrees to Referral, Service Needed, Nursing, BSO, Reason for Referral, Diagnosis, NKA, Allergies, Medical Orders, Best practice/evidenced based practice, Specify Wound, IV Therapy, Drug, Dose, Duration of remaining community treatment, Last Dose in Hospital, Community Therapy to Start, REMDESIVIR

Start time may be delayed up to 8 hours if the next dose due is between midnight to 0800h. Additional Referral Information/ Specific Health Care Orders: (Infusion orders require frequency, dosage and duration)

Signature, Print Name/Designation/Title, OHIP Billing Code 1, CPSO/CNO Reg. Number, Phone Number, Date (dd/mm/yy)