



WRH-MC 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, Medication history

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)