

Hannah Chiu, MD FRCS
Laser Cataract Surgery
Retina – Medical
(Brampton & Vaughan)

Dexter Furlonge, MD FRCS
Strabismus & Pediatric
(Brampton)

Kay Lam, MD FRCS
Glaucoma Surgery
Laser Cataract Surgery
(All Sites)

Tran Le, MD FRCS
Comprehensive Ophthalmology
(Vaughan)

Raj Maini, MD FRCS
Laser Cataract Surgery
Refractive Surgery
Cornea & Anterior Segment
Oculoplastic Surgery
(All Sites)

Efrem Mandelcorn, MD FRCS
Retina – Medical & Surgical
(Vaughan)

Mark Mandelcorn, MD FRCS
Retina – Medical & Surgical
(Brampton)

Fariba Nazemi, MD FRCS
Strabismus & Pediatric
Laser Cataract Surgery
(All Sites)

Soheil Somani, MD FRCS
Laser Cataract Surgery
Refractive Surgery
Retina – Medical
(All Sites)

Eric S. Tam, MD FRCS
Laser Cataract Surgery
Refractive Surgery
(All Sites)

Lili Tong, MD FRCS
Laser Cataract Surgery
Comprehensive Ophthalmology
(All Sites)

Daniel Weisbrod, MD FRCS
Retina – Medical
(Vaughan & Scarborough)

Peng Yan, MD FRCS
Retina – Medical & Surgical
(Vaughan & Scarborough)

Darana Yuen, MD FRCS
Glaucoma Surgery
Laser Cataract Surgery
(Brampton & Vaughan)

Referring Doctor: _____ OHIP Billing #: _____

Email: _____ Office Phone: _____ Fax: _____

Patient Last Name: _____ [] male [] female

Given Name: _____ DOB (Y-M-D): _____

Health Card #: _____ Version Code: _____

Address: _____


Email: _____ Mobile Phone: _____

Home Phone: _____

Alternate Contact: _____

Reminder Preference:

Email SMS Text Voice Call

CONSULT WITH: [] No preference [] S. Somani [] D. Weisbrod [] E. Tam [] R. Maini [] P. Yan [] D. Yuen [] F. Nazemi [] M. Mandelcorn [] H. Chiu [] K. Lam [] D. Furlonge [] E. Mandelcorn [] T. Le [] L. Tong		LOCATION: [] Any site [] Brampton [] Vaughan [] Scarborough URGENCY: [] Routine [] ASAP [] Urgent (call to confirm)	
REASON FOR REFERRAL (please check/circle where applicable):			
LASER VISION CORRECTION / REFRACTIVE LENS EXCHANGE (UltraView LASIK) [] Book complimentary pre-assessment		PERIORBITAL COSMETIC SURGERY / REJUVENATION [] Upper lid blepharoplasty [] Brow ptosis [] Lower lid blepharoplasty [] BOTOX Please indicate on the diagram the areas of interest:	
CATARACT [] Standard OHIP only [] Manual cataract surgery [] Enhanced Single Focus IOL [] UltraView ReLACS [] Astigmatism / Toric IOL (Laser assisted cataract surgery) [] Expanded Range of Focus IOL Is your patient currently under active dry eye treatment? YES NO			
ANT SEGMENT	Pterygium	PCO	Keratoconus
GLAUCOMA	Narrow angles	High IOP	Disc cupping
RETINA	Retinal breaks	ARMD (dry / wet)	Diabetes
PLASTICS	Ectropion / Entropion / Ptosis	Chalazion	Cyst / Lump
PEDIATRICS	Strabismus	Amblyopia	Tearing
OTHER	remarks/drawing:		
EYE EXAM	OD	OS	
BCVA			
Refraction			
IOP			

Additional Information:
