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Providence HEALTH CARE

# ST. PAUL'S HOSPITAL
# VASCULAR MEDICINE CLINIC
# REFERRAL

* 8 6 3 2 *

Internal Medicine Referral

Place Patient Form Label Here

Patient name: _____

PHN: _____ ☐ Male ☐ Female

DOB: _____ ☐ Other: _____
(dd/mmm/yyyy)

*This clinic provides comprehensive Internal Medicine care for patients with or at risk for vascular disease. We focus on evaluation and management of sub-optimally controlled vascular risk factors, incidental atherosclerosis found on imaging, demand ischemia/ type 2 MI in multi-morbid patients and myocardial injury after non-cardiac surgery (MINS).*

**DATE OF REFERRAL:** _____

***All referrals will be triaged and prioritized**

Patient address: _____

City: _____ Province: _____

Postal code: _____ Email: _____

Home phone: _____

Cell phone: _____

Work phone: _____

Mobility: ☐ Wheelchair ☐ Other: _____

☐ Interpreter required Language: _____

**URGENCY:** ☐ **Urgent** (within 2 weeks) Reason: _____
☐ **Non-urgent**

**REASON FOR REFERRAL:** _____

**Check all that apply:**

- ☐ Dyslipidemia
- ☐ Hypertension
- ☐ Diabetes
- ☐ Chronic Kidney Disease
- ☐ Smoking
- ☐ Metabolic Syndrome
- ☐ Obesity
- ☐ Family history of atherosclerosis
- ☐ Surgery within 1 month
- ☐ Arterial calcification on imaging
- ☐ Peripheral Arterial Disease
- ☐ Stroke / TIA
- ☐ Coronary Artery Disease
- ☐ Myocardial Infarction
- ☐ Demand Ischemia

**Was patient admitted to Internal Medicine / CTU recently?** ☐ No ☐ Yes - Physician: _____

**REFERRING PROVIDER:**

Printed name: _____ MSP #: _____

Phone: _____ Fax: _____

**FAMILY PHYSICIAN:** ☐ Same as above

Printed name: _____ MSP #: _____

Phone: _____ Fax: _____

STAMP

*** For prompt booking, ensure all sections are fully completed.**
**Please include medication list, consult notes, and relevant investigations.**

## FAX COMPLETED REFERRAL TO: 604-602-8661

**Location: St. Paul's Hospital, Vascular Medicine Clinic**
**Rm 5900, 5th floor Burrard Building, 1081 Burrard Street, Vancouver, BC, V6Z 1Y6**
**Phone: 604-806-8735 Extension 2**



These clinics are affiliated with UBC Faculty of Medicine and for this reason clinic patients should expect their visit could include a medical student or resident.