UNITY HEALTH TORONTO

St. Joseph's Health Centre, Palliative Care
30 The Queensway, Toronto, ON M6R 1B5
5th Floor East Wing
T #: 416-530-6389 **Fax#: 416-530-6007**

St. Michael's Hospital, Palliative Care
30 Bond St., Toronto, ON M5B 1W8,
4th Floor Donnelly Wing
T#: 416-864-5226 **Fax #: 416-864-5132**

Referral to Palliative Care and Symptom Improvement Clinics at Unity Health Toronto

Patient Information

First Name: Surname:		
Address:		
Date of Birth: (DD/MM/YY)	Age:	Sex: M F Non-Binary
Contact Name & Phone Numbers:		
Health Card Number:		Version Code:

Referring Provider Information

Name:	Address:	
Phone Number:	Fax Number:	Provider Billing #:

Priority: ☐ Urgent (24-48 hrs) For urgent referrals, must call the clinic☐ Semi-urgent (less than 1 week) ☐ Routine (1-2 weeks)

Diagnosis: _____

Accommodations Required (please list):

_____

_____

Reasons for Referral (check all that apply):

☐ Pain	☐ Pruritus	☐ Advance care planning	☐ Information on MAiD
☐ Fatigue	☐ Constipation	☐ Values and goals of care	☐ Palliative navigation
☐ Nausea	☐ Insomnia	☐ Distress about illness	☐ Para/thoracentesis
☐ Poor appetite	☐ Anxiety	☐ Caregiver challenges	☐ Other _____
☐ Shortness of breath	☐ Depression	☐ Increased home supports	☐ Other _____