



Clinician Receiving Referral (clinic details available on page 2)

CLINIC NAME:

CLINICIAN NAME (one clinician only):

Patient Details and Communications

PATIENT SURNAME:

FIRST NAME:

TITLE: Mr / Mrs / Ms / Miss

DOB:

GENDER: Male / Female / Unspecified

ADDRESS:

HOME CONTACT:

MOBILE CONTACT:

EMAIL:

INTERPRETER REQUIRED: Yes / No

COMMUNICATION PREFERENCE: Email / Mobile / Home telephone / Postage

LANGUAGE / DIALECT:

IDENTIFIES AS ABORIGINAL / TORRES STRAIT ISLANDER ORIGIN: Yes / No

Non-Medicare WorkCover DVA Medicare

MEDICARE NO.

IF THE PATIENT HAS A CARER:

(Name)

(Telephone)

(Email details)

SPECIALS NEEDS / REASONABLE ADJUSTMENTS FOR DISABILITY: (specify)

Patient Healthcare Details

NAME OF GP: (If not referrer)

GP PROVIDER NO: (If not referrer)

CLINICAL INFORMATION / REASON FOR REFERRAL: Please attach relevant investigations to prevent triage delays.

Referring Clinician Details

REQUESTING DR:

PROVIDER NO.

DATE:

ADDRESS:

TELEPHONE:

FAX:

SIGNATURE:

Outpatient Department Clinic and Clinician Details

<p><u>Geriatric Clinic</u> Dr Sarah Baldwin Dr Yun Xu Dr Chuang Dr Tony Youssef Dr Litsa Morfis Dr Madeleine Wilkinson Dr Grant Pickard</p>	<p><u>Neurology Clinic</u> Dr Louise Allport Prof Mark Hersch Dr Jane Prosser Dr Elizabeth Shiner Dr Mahtab Ghadiri Dr Justine Wang Dr Monica Badve Dr Walid Matar</p>	<p><u>Haematology Clinic</u> Dr Beng Chong Dr Sylvia Zheng Dr Qin Liu Dr Amanda Hugman</p>	<p><u>Diabetic / Endocrine Clinic</u> Dr Terry Diamond Dr Michael Reyes Dr Peter Rohl Dr Anthony O'Sullivan Prof Peter Smerdely</p>
<p><u>Drug & Alcohol Clinic</u> Dr Peter Gottlieb</p>	<p><u>Rheumatology Clinic</u> Dr Bill Giannakopoulos</p>	<p><u>Wound Clinic</u> Wound CNC</p>	<p><u>Immunology</u> Prof Steven Krilis</p>
<p><u>Movement Disorder Clinic</u> Dr Stephen Duma</p>	<p><u>Colorectal Clinic</u> Prof David Lubowski</p>	<p><u>Gastroenterology</u> Dr Gokulan Pavendranathan</p>	<p><u>Swallow</u> Dr Peter Wu</p>
<p><u>Dermatology Clinic</u> Prof Dedee Murrell Dr Ben Daniel</p>	<p><u>Infectious Disease Clinic</u> Dr Chris Weatherall Dr Pamela Konecny Dr Richard Sullivan</p>	<p><u>Vascular Clinic</u> Dr Eric Farmer Dr Jim Iliopoulos Dr Lubomyr Lemech</p>	<p><u>IBD</u> Prof Michael Grimm Dr Gokulan Pavendranathan Dr. William Bye</p>

NOTE: General clinic name is no longer accepted. Please address your referral to **one** of the clinicians listed above. Referral addressed to multiple clinician names will be rejected.