

Toronto Eye Surgery

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Patient Details Name:	Referrer Details / Stamp Name: Address:
Date of Birth:	radioss.
Contact:	
This patient has been referred for: Cataract Diabetic Retinopathy Macular Degeneration Glaucoma Pterygium Strabismus Paediatric Eye Check Sore Eye / Red Eye	Provider No: Referral period: Date: Decreased Vision Flashes / Floaters Watery Eye Corneal Foreign Body Eyelid Abnormality Refractive Eye Surgery Corneal Pathology Routine Eye Check
□ Other_	
Additional Information	
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ry X	v W A P
Signature	☐ Please send another referral pad



HOW TO FIND US (SEE MAP ABOVE – MARKED A)

We are located on the Boulevard in Toronto, between Cary St. and Cook St. There is car parking at the rear of the premise. There is easy wheelchair access.

WHAT TO BRING:

- This referral letter
- Current glasses and sunglasses
- List of medication and any allergies
- Details of your GP or optometrist
- Medicare / Veteran Affairs / Pension card / Health Fund details
- Please check with the receptionist regarding cost of consultation

You are advised not to drive to the appointment as your pupils may be dilated. We encourage you to bring a companion in case you are unable to drive on the day.