

LiveWell Chronic Disease Management Referral (Updated November 4, 2016)

Central Triage, Box 1, Royal University Hospital, 103 Hospital Drive, Saskatoon SK S7N0W8

www.saskatoonhealthregion.ca/LiveWell FAX: 306-655-6758

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COMPLETE ALL SECTION	IS & FAX TO	Date of Referral: (dd/month/yyyy)		
Required Information:	cal History	Consult Note	□ Medications	□ Current lab results
Reason for referral				
□ I have discussed referral with individu	al			
Name of Referring Individual			Phone	Profession:
Name of Patient's Family Physician			Phone	Fax:
Patient Profile				
Surname	e			
PHN DOB dd/mmn		nm/yy		
Address Include postal code				
Primary Phone#	Secondary Phone#			
Email:				
Patient may benefit from programs that	at focus on First	nations or new immigra	nts	
Suitable for Group?				
Other considerations:   Hearing  Vision:	sion 🗖 Langua	age - Interpreter required	l? □ Yes □ No	
•	•	Impairment D Mental		Transportation
D Other:				
Adult Nutrition	Pediatric	: Obesity	Cardiovascul	ar
🗖 Weight management 🗖 IBD 🗖 IBS	Dietitian	consultation only	Cardiac Reh	abilitation Education
Celiac  Heart Healthy Nutrition	Childho	od Obesity Multidisciplin	ary D Exercise The	erapy
		onsultation	-	
□ Other:	(a	attach a growth chart)	( attach ang	iogram, echo, ECG, stress test
	X	<b>,</b>		
Diabetes				
□ New Diagnosis □ Pre-existing □ T	уре 1 🗖 Туре	2	abetes	
Adult P	Pregnancy		Pediatric (Age 0-17, undiagnosed type 1)	
			Newly diagnosed, untreated diabetes - do NOT use this form	

Education	Gestational	(Physician Referral Required)		
Education & Diabetes Specialist	□ Туре 1  □ Туре 2	Urgent – Consult Pediatric Endocrinologist at RUH Ph: 306-655-1000.		
(Physician Referral Required)	(attach pre-natal sheet)			
	EDC:	Non-urgent – Fax: 306-844-1536 Ph: 306-655-2048		

Exercise	Self Management	Respiratory	Rheumatology
Exercise Therapy	LiveWell with Chronic Conditions	COPD Nurse	(check all that apply)
First Step Exercise	LiveWell with Chronic Pain	Asthma Nurse	OA RA AS Lupus
□ Stroke Exercise		Pulmonary Rehab	Reactive Arthritis Polymyalgia
Parkinson's Exercise		(attach spirometry / PFT)	Psoriatic Arthritis
Pulmonary Rehabilitation			Other:

Comments: