Diabetes Education Program (DEP)

Referral Form for Eastern Counties Champlain Region

Centre de santé communautaire de l'Estrie
Clinique de diabète/ Education Clinc

- ☐ Alexandria[3] Fax: 525-3991, Tel.: 525-5544
- ☐ Bourget[3] Fax: 487-4182, Tel.: 487-1802
- ☐ Cornwall[3] Fax: 937-4938, Tel.: 937-0478
  Toll free: 1-855-342-2338
- ☐ Crysler[3] Fax: 987-9908, Tel.: 987-2683
- ☐ Embrun[3] Fax: 443-9519, Tel.: 443-3888

☐ **Cornwall Community Hospital Diabetes Centre**[3, 4, 5]
Fax: 936-4623, Tel.: 936-4615
- Multidisciplinary team / Specialist consultation available with Dr. T. Baitz, Dr. J.P. DeYoung or Dr. M.F. Levac
- Glengarry Seniors Support Centre, Lancaster

☐ **Hawkesbury & District General Hospital Diabetes Clinic**[3, 4, 5]
Fax: 636-6194, Tel.: 632-1111 ext. 52701
- Multidisciplinary team / Specialist consultation available with Dr. M. Thibodeau

☐ **Mohawk Council of Akwesasne Diabetes Education Center**[1]
Fax: 575-1169, Tel.: 575-2341, ext. 3246
- Home Care and Support Program

☐ **Winchester District Memorial Hospital Diabetes Education Program**[1]
Fax: 774-6536, Tel.: 774-2422, ext. 6765
- Specialist consultation available with Dr. C. Irobi

1. *English only* *2. French only* *3. Bilingual*
4. Gestational diabetes *5. Pump initiation*

Champlain Diabetes Regional Coordination Centre:
http://www.champlaindrcc.ca/

Client's name:
Preferred language of service: ☐ French ☐ English ☐ Other: _____
Address:
Telephone # (home):
Telephone # (work):
Date of birth:
Health card #:

☐ Newly diagnosed ☐ Established diabetes

☐ Type 1 diabetes
☐ Type 2 diabetes
☐ Pre-diabetes (IFG/IGT)
☐ Gestational diabetes

Requested services (please check all that apply):

☐ Individualized counseling by nurse and dietitian and/or group education
☐ Insulin initiation (please fax your insulin prescription - available at: **www.ocfp.on.ca**)
☐ Pump initiation and follow-up
☐ Specialist consultation:
Dr. _____
(name of physician)

Comments / Special concerns:

Health care provider:

Signature:

Telephone number:

Date:

Please fax <u>blood work</u>, <u>medication list</u> and <u>medical history</u> with referral. Thank you.