

Dalhousie Family Medicine IUD/Endometrial Biopsy Clinic Referral Form

Please fax completed referral forms to Dr. Jennie Leverman 473-4353

Please note : Your patient's procedure will be performed by a resident physician under the supervision of an attending staff in the Dalhousie Department of Family Medicine

Date _____

Patient Name _____

Health Card # _____ Or Attach Addressograph containing info

DOB DD/MM/ YYYY _____

Contact Numbers: home _____

cell _____

alternate _____

Mailing Address _____

Referring MD _____

MD Contact number _____

Patient Medical History (please check all that apply):

On anticoagulants:

Diabetes:

Peripheral Vascular disease:

Chronic steroid therapy:

Active Malignancy:

Medication List:

N.B. Please ask your patient to bring all medications to her clinic appointment.

Endometrial Biopsy:

Endometrial biopsy

Please provide a brief description of the patient's history (please attach ultrasound report if completed):

Intrauterine Contraceptive Device Insertion:

IUD insertion Please provide a brief history of the reason for IUD insertion:

Prior to referral, please complete the following (please check when completed):

1. Swab(s) completed for Chlamydia and Gonorrhea
2. Prescription for Mirena or Copper IUD, depending on patient preference provided (patient is to bring IUD to scheduled appointment). Patient advised to take a dose of an NSAID, if no contraindications, one hour prior to the procedure.
3. I have reviewed the IUD counseling template with the patient. *Please book for IUD only.*
4. I have not reviewed the IUD counseling template with the patient. *Please book for counseling and IUD insertion.*

Please also ensure that the patient has someone to drive her home post procedure.

Please Note:

1. The clinic is staffed by an Attending Physician and residents training in the Halifax Dalhousie Family Medicine training program. **Your patient's procedure will be performed by a resident physician under the supervision of the Attending.**
2. Standard aftercare to be provided by the patient's family physician. If the patient develops complications from the procedure, please contact clinic co-ordinator, Dr. Jennie Leverman, at 473- 1234, and we will arrange for assessment in a timely manner.
3. Please advise your patient that missed appointments not cancelled by 24 hours prior to appointment will result in patient being billed directly for cost of appointment and administrative costs.



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