



THE LUNG CENTRE *
University of British Columbia

Institute for HEART + LUNG Health

**Vancouver General Hospital
The Lung Centre* (Respiratory Clinic) Referral Form
PLEASE FAX TO 604-875-4695**

Date: _____ **PATIENT NAME:** _____

Address: _____

Telephone: (h) _____ (w) _____

PHN: _____ Date of Birth: _____

Refer to Doctor _____ **OR** Doctor with the first available appointment

Reason for referral (please circle):

- | | | |
|------------------------------|-------------------|-------------------------------|
| 1. COPD | 6. Asthma | 11. Severe Asthma Clinic |
| 2. Hemoptysis | 7. Lung mass | 12. Pulmonary Hypertension |
| 3. Dyspnea NYD | 8. Cough NYD | 13. Occupational lung disease |
| 4. Thrombo-embolic disease | 9. Bronchiectasis | 14. Pleural Disease |
| 5. Interstitial lung disease | 10. COPD clinic | 15. Neuromuscular Disease |

Other (specify): _____

Patient History:

Investigations:

Chest x-ray YES/NO
CT Scan YES/NO
Pulmonary Function Test YES/NO
Lab work YES/NO

Where was the test performed?

(If yes, please fax the report(s) and/or other documents with this referral form.)

Current Treatment:

We will contact your office with the appointment.

REFERRING PHYSICIAN

Name (print): _____ MSP #: _____

Signature: _____ Telephone: _____

Specialty Clinics

Asthma
COPD
Interstitial Lung Disease
Lung Cancer
Occupational Lung Disease
Pleural Disease
Pulmonary Hypertension
Respiratory
Neuromuscular
Disorders

Consultants

N. Ayas, FRCPC*
E. Beaudoin, FRCPC
C. Bergeron, FRCPC*
C. Carlsten, FRCPC
V.J. Cook, FRCPC
J.M. FitzGerald, FRCPC*
J. Fleetham, FRCPC*
J. Johnston, FRCPC
N. Khalil, FRCPC
S. Lam, FRCPC
R.D. Levy, FRCPC*
R.G. Nador, MD*
D. Ostrow, FRCPC*
J. Road, FRCPC*
J.J. Ronco, FRCPC*
C.F. Ryan, FRCPC*
J. Swiston, FRCPC

(*Denotes Incorporation)

Clinic Manager

Kelly Labrecque

COPD Transitional Team

Carmen Rempel RRT, CRE
Christine Hinds RRT, CRE
Laura Lotzer, RN

Airways Educator

Jenna Jangalee RRT, CRE

Nurse Practitioner

Lisa Kolkman

PH Nurse

Connie Sherba
Kelly Kerwin



The Lung Centre
Gordon and Leslie
Diamond Health
Care Centre

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F 604-875-4695

*Incorporated as The Laurel Lung Centre Inc.