



## Neurosurgical Assessment Clinic Referral Form

**Dr. Neilank K. Jha MD, FRCPC**  
 Neurosurgeon – Spine Surgeon

10 Trench Street, 2<sup>nd</sup> Floor, C Wing, Richmond Hill, L4C 4Z3  
 Telephone: 905-883-2004 ext. 1 Fax: 905-883-0772

Date: \_\_\_\_\_  
 dd/mm/yyyy

MRN: \_\_\_\_\_

Patient Name: \_\_\_\_\_  
 Last, First Name

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_  
 dd/mm/yyyy

Health Card No. \_\_\_\_\_ Version Code: \_\_\_\_\_

Telephone Number. \_\_\_\_\_

Physician: \_\_\_\_\_

**Office Use Only**

Time: \_\_\_\_\_

Diag: \_\_\_\_\_

Fee: \_\_\_\_\_

ER  Ward

<b>Head Trauma</b> <input type="checkbox"/> Concussion (MTBI) <input type="checkbox"/> ICH <input type="checkbox"/> Head Injury <input type="checkbox"/> Chronic Subdural Hematoma <input type="checkbox"/> Epidural Hematoma <input type="checkbox"/> Hydrocephalus <input type="checkbox"/> Acute Subdural Hematoma <input type="checkbox"/> Post-Concussive Syndrome		<b>Spine</b> <input type="checkbox"/> Cervical <input type="checkbox"/> Mechanical <input type="checkbox"/> Thoracic <input type="checkbox"/> Neurogenic <input type="checkbox"/> Lumbar <input type="checkbox"/> Traumatic
<b>Peripheral</b> <input type="checkbox"/> Brachial Plexus <input type="checkbox"/> Ulnar <input type="checkbox"/> Carpal Tunnel <input type="checkbox"/> Other _____	<b>Neuro-Oncology</b> <input type="checkbox"/> 1° Brain Tumor <input type="checkbox"/> METS <input type="checkbox"/> Pituitary Tumor	<b>Neuro-Vascular</b> <input type="checkbox"/> Aneurysm <input type="checkbox"/> AVM <input type="checkbox"/> Cavernoma <input type="checkbox"/> Other _____

### Pertinent Patient History

Anticoagulants: \_\_\_\_\_

Age \_\_\_\_\_

\* All patients with Neurosurgical conditions may be referred to the Neurosurgical Assessment Clinic at Mackenzie Health. Patients that require sub-specialized care will be triaged through my office after consultation. No Neurosurgical procedures will be conducted at Mackenzie Richmond Hill Hospital.

\*Urgent cases will have a mechanism to reach me on-call for evaluation in the emergency room. Non-urgent cases may be scheduled in the Neurosurgical Assessment Clinic on Wednesdays at Mackenzie Richmond Hill Hospital.

