Rapid Orthopedic Consultation Clinic (ROCC)

Pacific Orthopedics and Sports Medicine

213 & 214 - 145 West 15th Street • North Vancouver • BC • V7M 1R9

Tel: 604-980-0504 • Fax: 604-980-0531

Date dd / mm / yyyy

Patient Information

Name Last, First

PHN

Date of Birth dd / mm / yyyy

Phone #

Gender ☐ Female ☐ Male

Referring Physician Information

Name Last, First

MSP #

Has this patient been referred before? ☐ Yes ☐ No

Name of Previous Orthopedic Surgeon

Body Part

- ☐ Shoulder / Arm
- ☐ Elbow / Forearm
- ☐ Hand / Wrist
- ☐ Hip / Pelvis
- ☐ Knee / Leg
- ☐ Foot / Ankle

Spine (please refer to Neurosurgery)

Diagnosis

- ☐ Arthritis
- ☐ Fracture
- ☐ Soft Tissue Injury
- ☐ Other

Urgent Referrals

For urgent assessments, please contact the surgeon on-call directly or via the LGH switchboard at 604-988-3131.

X-Ray Requirement

Please attach the requested X-ray reports.

This referral CANNOT be properly triaged without X-ray reports unless exceptional circumstances are indicated.

☐ Shoulder	(AP, Lateral, Axillary)
☐ Elbow	(AP and Lateral)
☐ Hand & Wrist	(AP and Lateral)
☐ Hip	(Standing AP Pelvis, True Lateral)
☐ Knee	(Standing AP both knees, Lateral, Skyline)
☐ Foot	(Standing AP, Lateral, Oblique)
☐ Ankle	(Standing AP, Lateral, Oblique)

Other Medical Imaging

- ☐ MRI
- ☐ Ultrasound
- ☐ CT
- ☐ Nuclear Medicine

Imaging Location

- ☐ Lions Gate Hospital
- ☐ North Shore Medical Imaging
- ☐ Squamish General Hospital
- ☐ Other
- ☐ Whistler Health Care Centre
- ☐ Sechelt Hospital

Reason for Referral

☐ History of Present Illness

☐ Please attach past medical / surgical history, medication list and allergies as required.

Orthopedic Surgeon

☐ BAGGOO	(Knee, Foot, Ankle)
☐ JANDO	(Hip, Knee)
☐ McCONKEY	(Shoulder, Knee)
☐ PANAGIOTOPOULOS	(Hip, Knee)
☐ SAMLER	(Shoulder, Elbow, Knee)
☐ SIDKY	(Hip, Knee)
☐ ZARKADAS	(Shoulder, Elbow, Knee)
☐	
☐ FIRST AVAILABLE	

Expedited Care

☐ YES, I would like expedited care for my patient. The initial consultation may involve a screening physician.

☐ NO, my patient will wait for the requested Orthopedic Surgeon

North Shore Division of Family Practice

We will contact the patient directly for an appointment

SharedCare Partners for Patients