

Pathways Listing Specialty: Family Practice

Please note that by sending Pathways information about your practice you are consenting to posting this information on the Pathways website for use by physicians, other authorized healthcare providers and their staff. If you have any concerns about your information being posted, please contact your local Pathways Administrator. Also note that, where necessary, Pathways may use third party service providers and/or cloud platforms, including some that may be located outside of Canada, to deliver its services. All third party service providers utilized demonstrate stringent security protocols that are consistent with Pathways privacy and security policies and meet industry best practices.

You also consent to posting this information on the Pathways Virtual Care Directory and understand your information will be made available for **public use** unless you request specific exclusions. If at any time you wish to withdraw this consent, please [contact us](#). Here is the [link](#) to the online survey form for the Virtual Care Directory.

FP with community practice	Only doing locums	Hospitalist	Working only in clinic(s)
First Name:	Last Name:	Name you go by (if different):	Male Female
MSP # :	Division of Family Practice:		

Office / Contact Information

	Location 1	Location 2 (if applicable)
Street Address:		
City:		
Postal Code:		
Office Phone #:		
Office Fax #:		
Private back line (for physician contact only)		
Practice Status:	Public (MSP) Private Pay	Public (MSP) Private Pay
Phone line hours:		
Clinic hours:		
Public Website:		
Private email (for physician use only)		
Public email (ok for patient use to contact your office)		
Languages Spoken in your practice:	English,	

Senior MOA Contact Information (For our follow up call only – will never be publicly displayed)

Name	Phone Number	Email Address

Status: (Please check all that apply)

<p>Not accepting any new patients</p> <p>Accepting new patients for ongoing care</p> <p>Yes I can take on 1-4 new patients per month</p> <p>Yes I can take on up to 10 new patients per month</p> <p>Walk-in/Virtual care available for patients in our area</p>	<p>Are you currently offering:</p> <p>In person appointments</p> <p>Telephone appointments</p> <p>Video appointments</p>
--	---

If you received this form at an event - Please return this form to the Division Admin Staff at the event.

If you received this form by fax - Please return to the Pathways administrator at:

Pathways Listing Specialty: Family Practice

If there are any limitations to how you accept new patients for ongoing care, please explain the limitations:

Accepting new nursing home patients for residential care

(Please list which nursing homes:)

Accepting referral consultation requests from colleagues to assess their patients for specific services or procedures (e.g. sports med, primary care OB, palliative, addictions etc)

(*if yes, we will follow-up for further details)

Accepting referrals for consultation through a clinic or hospital (other than your office practice. e.g. maternity clinic)

(Please list which clinic(s)/hospital)

Not currently practicing: Please specify reason. "on leave, retired, etc."

Online Booking URL (optional):

Video Platform you are using (optional):

How are you currently booking appointments with your patients:

Book by phone call to the office

Book via online booking

Book via email to our office (email address):

We offer online drop-in hours for our patients. If yes, what are the hours?

Other Important Information:

For flu-like symptoms, which of the following would you like your patients to do (check all that apply)?

Call our office so we can assess and decide on the best course of action

Go to our online waiting room (Please ensure you have entered your online waiting room link in the general information)

Go to our clinic website for further information (Please ensure you have entered your clinic website in the general information)

Are there any other specific instructions about your clinic that patients should be aware of?

If your Division created an online clinic for unattached patients to have virtual visits, would you be willing to work some shifts?

Yes

No

Unsure

If you received this form at an event - Please return this form to the Division Admin Staff at the event.

If you received this form by fax - Please return to the Pathways administrator at: