

**Paediatric Consultation Clinic (PCC) Referral
Children's Health
FAX to 289-398-1003**

This clinic is for patients who do not have a Paediatrician in the community.
ALL completed referral forms and ED/UCC Face Sheet must be faxed to 289-398-1033.
Please give patients the attached Clinic Information Sheet.

Parent/Guardian Contact Information

Parent/Guardian Name: _____
Relationship to Patient: _____
Preferred Contact #: _____

Non-Urgent Paediatric Consultation required within 1 – 4 weeks.

Referral Information

Reason for Referral:

Clinical History and Findings:

Eligibility Criteria:

- Children age 0 –17 years
- Follow Up / Consultation required within 1 – 4 weeks

Exclusion Criteria:

- Acutely unwell children
- Primary mental health, behaviour and/or developmental concerns
- Children requiring routine outpatient services for chronic conditions
- Surgical consults
- Primary care

Referral Source:

- SCS
 NFS
 WHS
 PCS
 FES
 Other: _____

Relevant Clinical Information (attach where possible):

- Patient History and Consult Notes
 Lab (Pending: No Yes)
 Any results not available in Meditech
 Other: _____

Referring Physician Information

Referring Physician Name: (Please print)

Referring Physician Signature:

Billing Number:

Date: (dd/mm/yyyy)

OFFICE USE ONLY

Appointment Date (dd/mm/yyyy): _____ **Time:** _____ **Initials:** _____

Notification provided to:

Patient Parent: _____ **Date:** _____ (dd/mm/yyyy)

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Paediatric Consultation Clinic (PCC) Referral Children's Health

Patient Information Sheet

Your child has been referred to the Paediatric Consultation Clinic (PCC) for an appointment within the next 1 – 4 weeks.

The clinic will notify you of your child's appointment within 7 – 10 days. If you have not received an appointment date and time within 10 days, please call 905-378-4647, extension 43518.

Where And How To Get There:

This clinic is located within 4B – Children's Health Unit at the St. Catharines Site (1200 Fourth Avenue). Please arrive at least 30 minutes before your scheduled appointment to allow for registration. When you arrive, please register at the main registration area located to the right when you first enter the hospital. Once registered, take the main elevators to the 4th floor and turn left into 4B Children's Health unit. Proceed to the second desk area where staff will direct you to the clinic area.

What To Bring:

Please bring your child's health card, all medications and yellow immunization record. You should also bring diapers (if used) and snacks for your child, and some entertainment/toys for your child while you wait.

What If My Child Is Getting Worse:

If your child is getting worse, please return to your local Emergency Department / Urgent Care Centre for reassessment and care.

Your Family Doctor:

Your family doctor is the best way to access medical care and acts as the central person in your overall healthcare. If you do not have a family doctor, we strongly advise you to get one. You can find help at www.niagaradocs.ca or by calling **Healthcare Connect Ontario at 1-800-445-1822**. The City of St. Catharines provides similar information on their website www.stcatharines.ca or by calling 905-359-6043.

In case you cannot attend the appointment, please call the clinic at 905-378-4647, extension 43518 as soon as possible.