

Referral Form

Dr. Jagmeet Sethi MD, FRCPC Internal Medicine: Consultation for Medical Cannabis Treatment

Please use this form or your own referral form.

Dr. Sethi bills OHIP internal medicine codes, and she does not bill FP/GP codes. Her billing codes do not impact Family Practice billing. No fees are charged to the patient.

We will contact the patient to arrange a **video consultation or an in-person** appointment at our Burlington office. We will notify you by fax after the consultation is booked. We do regular follow-up visits. After the first visit, any cannabis-related issues can be directed to us, and we will book the patient urgently if needed.

Consultation for Medical Cannabis: within
1 week or less.

Urgent Consultation: 1-2 business
days.

Reason for Referral:

Patient must be 19 years or older.

Patient Information:

Name:

Street Address:

Date of Birth (MM/DD/YYYY)

City/Province/Postal Code:

____/____/_____

Phone #:

Health Card #:

Email:

Physician Information:

Referring Physician: _____ Billing #: _____

Address: _____

Telephone: (____) _____ - _____ Fax: (____) _____ - _____

Date: (MM/DD/YYYY): ____/____/_____

Physician Signature: _____

Please Fax Referrals to (905) 681-7751