Maternity Centre of Hamilton

McMASTER FAMILY HEALTH TEAM

McMaster University

☐ Maternity Centre Downtown Site: 100 Main Street West, 3rd Floor, David Braley Health Science Centre
☐ Mountain Hub: StoneChurch Family Health Site: 1475 Upper Ottawa St

Please Fax Completed Referral to: 905. 528. 9178

Patient Demographic Label	Referral Source:	
	Referring Phone:	
	Referring Fax:	
	Does the patient need an interpreter? YES ☐ NO ☐ Language(specify): ASL ☐	

Obstetrical History: G T P A L EDC: LMP:	
Past Medical History:	
Risk Factors:	
Medications:	Allergies:

PRENATAL CARE: ☐ Full FM-OB Care requested ☐ Family Physician Shared Care Requested	POSTPARTUM CARE: ☐ 6 week Postpartum visit requested ☐ IUD/LARC insertion at patient request ☐ 6 week Postpartum visit by Family Physician
APPOINTMENT DATE AND TIME: The Maternity Centre will notify Patient	

Patients will be delivered at St. Joseph's Hospital, Hamilton
Please attach relevant ultrasounds/bloodwork to referral

Clinic Phone: 905. 528. 5553
Clinic Fax: 905. 528. 9178

McMaster University FAMILY MEDICINE

Michael G. DeGroote SCHOOL OF MEDICINE