



PATIENT REFERRAL

Fax: 416-586-4686

URGENT - Medically Necessary Fertility Preservation
We will contact your patient within 24 hours

Referral to:

Date: (DD/MM/YYYY)

Downtown Location (250 Dundas St W, Unit 700):

Vaughan Location (9600 Bathurst St, Unit 300):

Ellen Greenblatt, MDCM, FRCSC, FACOG (REI)

Claire Jones, BSc, MD, FRCSC

Claire Jones, BSc, MD, FRCSC

Kimberly Liu, MD, FRCSC, MSL

First Available:

Heather Shapiro, MD, FRCSC

Any location

Downtown

Mississauga Location (800 Southdown Rd, Unit A4)

Vaughan

Mississauga

Miguel Russo, MD, FRCSC

The MSF team also includes reproductive endocrinology and infertility fellows and a nurse practitioner.

REFERRING PRACTITIONER: Billing #:

Phone: Fax:

Email:

PATIENT DEMOGRAPHICS (as per health card):

Previous patient of Mount Sinai Fertility? Y/N

Name:

Chosen Name:

DOB:

HC #:

Address:

Phone:

Email:

Primary Care Practitioner:

PARTNER DEMOGRAPHICS (as per health card):

Not applicable

Name:

Chosen Name:

DOB:

HC #:

Address:

Phone:

Email:

Primary Care Practitioner:

- Infertility, Sperm Banking, Preimplantation Genetic Diagnosis, Recurrent Pregnancy Loss, Egg Freezing\*, Donor Sperm / Donor Egg

Clinical Details:

Please include any relevant investigations and results for the patient and, if applicable, the partner: previous fertility testing & treatments, bloodwork results from <1 year, ultrasounds, semen analysis, genetic testing, and abdominal or pelvic surgery reports.

Fertility Preservation - Oncology/Medical Need: Please attach all relevant notes/reports.

Please note: Sedation is provided in an outpatient setting without anesthesiologists present therefore egg retrieval cannot be performed safely in patients with a BMI >=40 or beyond ASA Class I-II. The age limit for Egg Freezing for Oncology patients is 43.

If Egg Freezing is for oncology or medical need, please select Fertility Preservation above.

Diagnosis:

- Chemotherapy, Radiation Therapy, Surgery, Treatment Completed

Mount Sinai Fertility will contact your patient with the appointment date and time, including any instructions for the appointment.