

☐ **Request for Menopause Consultation with Dr. Saira Alladina PharmD**
(Please note, if the patient is not a candidate for menopause consultations, the referral may be declined.)

☐ **Request for Women's Health Consultation with Dr. Natalia Roehlig (66827) MD, CCFP**
Please submit MSP code 03333 to Dr. Natalia Roehlig

Patient Info: _____ Date of referral: _____

Name (Last, First): _____ DOB (YYYY/MM/DD): _____

PHN: _____ ☐ M ☐ F Other (pronouns): _____ Phone #: _____

Email: _____ Address: _____

Referring Practitioner Info: _____ *Practitioner/ Office stamp here:*

Name: _____ MSP number: _____

Fax: _____ MRP (if different): _____

Reason for Referral:

Relevant Medical History:

Medications:

*Please complete this form in its entirety and attach all relevant investigations/ medication lists etc.
Our office will contact patients directly to schedule appointments.*

**Referrals can be faxed to 604-971-6768 or emailed to
infomarine@ihealthmd.ca**

***Please note that consultations with Dr. Saira Alladina are not covered under MSP.
All appointments with Dr. Alladina are billed privately.***