



PODIATRY REFERRAL FORM

Please forward to Southcare Intake Officer by:

FAX: (02) 9540 7869 or POST: Southcare, 126 Kareena Road, Miranda NSW 2228

WE FOCUS ON PROVIDING TREATMENT TO PATIENTS WITH ACTIVE FOOT ULCERS, CELLULITIS OR SERIOUS FOOT INFECTIONS. FOOT ASSESSMENT AND EDUCATION IS ALSO PROVIDED, WITH PRIORITY GIVEN TO PATIENTS WHO HAVE EXISTING PERIPHERAL VASCULAR DISEASE (POOR CIRCULATION), PERIPHERAL NEUROPATHY (DAMAGED SENSATION OF THE FEET) OR INFECTION.

THERE IS ALSO A VERY LIMITED CONSULTING COMMUNITY PODIATRY SERVICE FOR PEOPLE WHO ARE COMPLETELY HOUSEBOUND.

NB: ONLY PATIENTS AT HIGH RISK OF DEVELOPING FOOT COMPLICATIONS ARE ELIGIBLE FOR TREATMENT

**PATIENT
DETAILS**

SURNAME _____ GIVEN NAME(S) _____
 D.O.B _____ MALE/ FEMALE (Circle) MRN (office use) _____
 ADDRESS _____
 LIVING ARRANGEMENTS: Alone/Hostel/with Spouse/ with Family/Other _____
 PREFERRED LANGUAGE: _____ INTERPRETER REQUIRED: YES/NO
 CONTACT NAME _____ RELATIONSHIP _____
 CONTACT'S PHONE NO. HOME _____ WORK _____ MOBILE: _____

**MEDICAL
HISTORY**

PLEASE ATTACH A FULL MEDICAL HISTORY & MEDICATIONS LIST WITH THIS REFERRAL

**CLINICAL
INFORMATION**

PLEASE TICK THE APPROPRIATE BOX(ES):

PERIPHERAL VASCULAR DISEASE YES NO PERIPHERAL NEUROPATHY YES NO
 ACTIVE FOOT ULCER/INFECTION YES NO PREVIOUS LOWER LIMB AMPUTATION YES NO
 COMPLETELY HOMEBOUND YES NO ADDITIONAL COMMENTS _____

**TREATMENT
REQUIRED**

ULCER MANAGEMENT YES NO EDUCATION YES NO
 DIABETES FOOT ASSESSMENT YES NO PODIATRIC OPINION YES NO

**REFERRING
PRACTITIONER**

NAME _____ TEL _____
 ADDRESS: _____ FAX _____
 PROVIDER NO. _____

SIGNATURE _____ DATE _____

(PRACTICE STAMP)

The information contained in this facsimile is confidential and is safeguarded by Legislation. It is intended for receipt only by the named addressee. If you are not the named addressee, any use, disclosure, copying or distribution of the facsimile or any of the information contained in it is prohibited. Please let us know immediately by telephone if you have received this communication in error, so that we can arrange for it to be returned (phone number (02) 9540 7175).