



2398 Yonge Street Toronto, ON M4P 2H4  
Tel: (416) 486-8666 Fax: (416) 486-8660

## Senior Primary Health Care Programs Referral Form

Senior Primary Health Care Programs at the Anne Johnston Health Station are free, voluntary and confidential. We serve seniors 55 years or above who live in the catchment area.

Our catchment area is as follows:

- North (Highway 401)
- South (Bloor Street)
- West (Bathurst Street)
- East (Bayview Avenue)

### Instruction for filling out the form:

- Please fill out the following information below. Once completed, fax to 416 486 8660 or drop it off in person. We are located at 2398 Yonge Street during our business hours (Mon-Fri 8:30 am – 5:00 pm, Wednesday until 7pm).
- Once we receive the form, a staff member will contact you to set up an appointment to conduct an initial assessment.
- For more information, please call us at 416 486 8666 or visit us online at [www.ajhs.ca](http://www.ajhs.ca).

Date of Referral: \_\_\_\_\_  
(MM/DD/YY)

Name of Client: \_\_\_\_\_

Date of Birth: \_\_\_\_\_  
(MM/DD/YY)

Address: \_\_\_\_\_  
No. Apt No. Street name

\_\_\_\_\_  
City Province Postal Code

Telephone: \_\_\_\_\_ Messages allowed? Yes  No

Service Request: (Please check one):

- SHHP
- Senior-on-Site
- Senior-off-Site (130 Eglinton Ave. East)

Referral Source (is someone calling on behalf of the client?):

- Self: \_\_\_\_\_
- Family member: \_\_\_\_\_
- Neighbor: \_\_\_\_\_
- Health Care Provider: \_\_\_\_\_
- Agency (Name and contact information)
- Others:

Reasons and Background of the Request: (in order for us to better understand your needs, please be as specific as possible):

**If this is an emergency, please contact 911 or get to the nearest hospital.**

=====

**OFFICE USE ONLY:**

Appropriate Referral:  Yes  No

• If yes, assigned to: \_\_\_\_\_

Date of first appointment: \_\_\_\_\_  
(MM/DD/YY)

• If no, please list reason(s): \_\_\_\_\_

External Referral provided:  Yes  No      If yes, list the agency:

Client is placed on AJHS Wait List:  Yes  No