



ELM Medicine

Unit 4- 1521 Upper Ottawa Street
Hamilton, Ontario L8W 3J4

Phone: 905-318-3006
Fax: 833-268-3660
info.elmmedicine@gmail.com
www.elmmedicine.ca

**Specialist Clinic. Internal Medicine. Infectious Diseases. Hepatitis B & C. Chronic Pain.
Lifestyle Medicine Clinic. Stress Reduction Clinic**

Dr. Atreyi Mukherji. MD, MPH, FRCPC

CONSULTATION	SCOPE OF PRACTICE
<input type="checkbox"/> INTERNAL MEDICINE	Hypertension, Liver Disease, Anemia, Abnormal Findings (WBC or platelet count, renal function, electrolytes), Unintentional Weight Loss, Fatigue NYD, Urticaria or Pruritus-Medical Work-up & Diagnostic Dilemmas.
<input type="checkbox"/> OBESITY & DIABETES	Medical management of weight including nutrition education and health coaching. Evidence based medications and surgery will be recommend as appropriate and based on patient preference.
<input type="checkbox"/> INFECTIOUS DISEASE	General, IV antibiotics start, Post-travel illness.
<input type="checkbox"/> HEPATITIS B & C	Investigation, treatment and long term follow up.
<input type="checkbox"/> CHRONIC PAIN FIBROMYALGIA	Wholistic approach - pharmacotherapy with lifestyle education & psychotherapy (develop coping skills). Weaning off narcotics and benzodiazepines are a high priority. Medical Cannabis
<input type="checkbox"/> MEDICAL PSYCHOTHERAPY	Trauma and Chronic Pain Focused Psychotherapy. Please complete the attached form.
<input type="checkbox"/> LIFESTYLE MEDICINE CLINIC	Wholistic approach - nutrition, lifestyle education, supplements and integrative health counselling (support health behaviour change). We will defer the pharmacotherapy to another specialist if out of scope (e.g. MS, RA). Suitable for: IBS, GERD/Heartburn, Migraines, Chronic Fatigue.
<input type="checkbox"/> NUTRITION PROGRAMS	Anti-inflammatory Diet, Plant-based Diet, FODMAPs. Suitable for: Primary and secondary prevention & intervention for the following conditions: Weight Management, Diabetes, Heart Disease, Cholesterol /Dyslipidemia, Cancer, Arthritis, IBS.

PLEASE FAX ALL REFERRALS TO THE CENTRAL BOOKING LINE

Toll Free Fax Line: 1-833-268-3660

Phone: 905-318-3006

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What is the reason for referral:

Please attach a list of patient's medications, allergies, and all relevant medical documents.

PATIENT INFORMATION - PLEASE COMPLETE		
Last Name:	First Name:	<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms.
Home Address:	City:	Postal Code:
Email Address:	Home Phone:	Mobile Phone:
Date of Birth:	OHIP Number:	

REFERRING PHYSICIAN - PLEASE COMPLETE	
Referring Physician (Print):	Backline Number:
Address:	Fax Number:
Physician Signature:	CC to Family Doctor (If Different):
Billing Number:	Family Doctor Phone:

Please Note: Our office will contact your patient with an appointment date and time.
Call or email us if you would like any information at any time. Contact us at 905-318-3006. All consult notes will be sent to your office via fax after each patient visit.

*Copies of this referral form can be downloaded at our website at www.elmmedicine.ca

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Weight & Metabolic Health Referral

ELM Medicine

Patient Information

Date: _____

Patient Name _____

Patient Phone # _____

Referring Clinician _____

Referring Provider Phone # _____

PLACE PATIENT LABEL HERE

Height (m – ft/in) _____ Weight (kg – lbs) _____ BMI _____

Referral Criteria

BMI over 30 with or without comorbidities

OR

BMI between 27 and 30 with comorbidities

AND

Patient motivated and willing to commit to a weight management program

Is this request urgent?

Yes No

Is the patient aware of this referral?

Services Requested

Lifestyle weight management program

OPTIFAST® Weight Management Program

Craving Change™ - cognitive behavioural therapy emotional eating program

Eat Right Now® – mindfulness-based emotional eating program

Fatty Liver Disease Management/ Fibroscan

Please fax or email the completed form. The patient will be contacted directly.

Integrative Medical Psychotherapy

OHIP insured by referral

Expertise in Trauma & Chronic Pain focused Psychotherapy

Mindfulness Based Interventions. EMDR. Somatic Experiencing (SE). DARE (Dynamic Attachment Re-patterning Experience)

Program combines psycho education & psychotherapy as individual sessions. Groups classes available intermittently including MBSR, MBCT, and Craving Change

What is the reason for referral? Please attach any reports from Psychiatry, if available.

*Patients with active suicidal ideations or other self-harming behaviors will not be accepted for these programs, unless under concurrent care through Psychiatry

By condition: choose ONE	Skills deficits in emotional regulation & interpersonal effectiveness
<input type="checkbox"/> Trauma/ PTSD focused Psychotherapy	<input type="checkbox"/> Depression
<input type="checkbox"/> Chronic Pain focused Psychotherapy	<input type="checkbox"/> Anxiety
	<input type="checkbox"/> Anger
	<input type="checkbox"/> Grief/ Loss
	<input type="checkbox"/> Emotional Eating

By Modality: choose one or more of the following options
<input type="checkbox"/> EMDR for PTSD
<input type="checkbox"/> EMDR for Chronic Pain
<input type="checkbox"/> Mindfulness based CBT - Depression, Anxiety, Anger, Grief
<input type="checkbox"/> DBT Skills - for emotional regulation
<input type="checkbox"/> Craving Change - program for emotional eating - individual and group **
<input type="checkbox"/> MBCT - Mindfulness Based Cognitive Therapy (8-week group class for preventing depressive relapse & reduce anxiety)
<input type="checkbox"/> MBSR - Mindfulness Based Stress Reduction (8-week group class for stress reduction, improve stress related physical and mental health conditions, cope with chronic pain, improve focus, participate more fully in one 's life)

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