Neurology Centre of Toronto (NCT)
100-491 Eglinton Ave West ♦ Toronto, ON ♦ M5N 1A8
Phone: 416-860-7554 ♦ Fax: 416-860-7559
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TELENEUROLOGY BOOKING FORM

== NEUROLOGY CENTRE OF TORONTO (NCT) ==

Evan Lewis, MD, FRCPC ♦ Dragos Nita, MD, FRCPC ♦ Maryam N. Nouri, MD, FRCPC

PATIENT CONTACT INFORMATION

Name (Last, First):
Date of Birth:
Home Address:

Affix Patient Label Here
(include home address)

TELENEUROLOGY APPOINTMENT TYPE (select one)

❑ **At Home**

Confirm with patient that he/she has access to:

- Device (e.g. desktop/laptop computer, tablet or smartphone) ❑
- Wi-Fi connection ❑
- Camera (external or internal) for device ❑
- Microphone (external or internal) for device ❑

NCT will contact the patient/family directly to arrange the appointment

❑ **Designated Telemedicine Site**

If known, provide details for closest site:

Site Name: _____
Site Address: _____
Site Phone: _____

NCT will contact the patient/family directly to arrange the appointment

Patients will be seen within 3 – 5 business days upon receipt of this form.
Ensure that a "Referral for Consultation" form [Form R-1] has been completed and accompanies this form

Referring Individual Name:

Health Region (if known):

Referring Individual Practice/Hospital Name:

Referring Individual Practice/Hospital City:

Referring Staff MD Name:

Current Date:

Referring Individual or Staff MD Signature: _____

Send this completed form <u>and</u> Form R-1 to Neurology Centre of Toronto (NCT) by fax (416-860-7554) or email (admin@neurologycentretoronto.com)