

130 Sproule Rd., Unit 101
Perth, On. K7H 3C9
P: 1-855-325-0001
F: 613-326-0002

310 Barton St. E
Hamilton, On. L8L 2X5
Phone & Fax Perth or Kingston Office

800 Princess St., Unit 208
Kingston, On. K7L 5E4
P: 1-844-994-0002
F: 613-507-7594



Please complete and fax or mail to the Medi-Green location closest to you

Consult Referral

Patient's Name: _____ DOB: _____ Date: _____

Patient's Address: _____ E-mail: _____

Phone: _____ Cell: _____ Patient's OHIP #: _____

Primary Pain Diagnosis

Current Medical Conditions

List of current medications & allergies (please include dosage & duration of treatment)

List of medication(s) that has been tried for the primary pain condition

REFERRING PHYSICIAN

Physician's Name: _____ Physician's Signature: _____

Physician's Direct Phone: _____ Fax: _____ OHIP Provider #: _____

Address: _____ E-mail: _____

Patient has been informed that Medical Cannabis is typically not covered by insurance policies, including OHIP (except Veterans & RCMP officers) and may cost in excess of \$10 per day.