



Dr. (Family Physician/NP/Most Responsible Physician - MRP)

You or a member of your patient's health care team have identified that your patient:

Name:	HCN:
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is someone who may benefit from the services of the Oxford Elgin Hospice Palliative Care Outreach Team.

The Outreach team includes care coordination, nursing/allied health, palliative physicians/nurse practitioners, personal support, spiritual care and bereavement/hospice supports.

TWO options to support family physicians/MRPs for a community palliative care patient:

Select ONE

I would like to work independently along with the community nursing agency to care for the patient. *(Provide contact info for daytime and afterhours nursing calls i.e. office back line, cell phone/alternate contact etc.)*

I would like a Consultation with a Palliative Care Outreach Team Provider. *(Following the consultation the Palliative Physician/Nurse Practitioner will be in contact with you to see how we can best work together to meet the patients goals of care).*

Palliative Care Outreach Team physician after-hours on-call support:

Indicate if needed:

I would like after-hours on-call support from the Palliative Outreach Team physicians. *(If you choose to take calls 24/7 please provide your contact information below.)*

Please indicate if there are any specific concerns you would like addressed:

You can access the 24/7 Palliative Care Outreach Team Support line for Health Professionals at

1-844-779-1833. Kindly, Patrice Kean

Hospice Palliative Care Outreach – Manager, Home and Community Care • 519-421-5671

Physician/NP Name (Printed)

Physician/NP Signature:

Physician/NP Billing Number (if consultation requested)

After-hours number

Office back line number

Fax to Oxford Elgin Hospice Palliative Care Outreach Team at 1-844-265-4429