



ENTOURAGE CLINIC

Now accepting referrals for patients seeking Medical Cannabis Treatment

Our Clinic is managed by a combination of psychiatrists and family physicians specializing in pain management and mood disorders.

There will not be any negotiations to physicians as our family physicians have an exemptions for billing.

Please see attached referral form or feel free to use your own Referral Form.

Minimum Information Required

***Reason for Referral**

***Medications**

***PHM**

***Any Relevant Imaging**

***FHO Practices-Our clinic will not cause negations**

Currently No Wait List

Unit #4-1447 Upper Ottawa Street Hamilton, Ontario L8W 3J6
Phone: 905-645-0520 Fax: 905-645-0524



Live your life

REQUEST FOR CONSULT-MEDICAL CANNABIS

REFERRING PHYSICIAN INFORMATION:

Referring Physician Name and Billing Number: patMdName ...tMdPhysNum

Office Phone/Fax Number: currMdPhone.default currMdFax.default

Referring Physician Signature or office stamp:

PATIENT INFORMATION:

Name: patName

Address: patAddressLabel Phone Number: ...omePhone.default

Health Card Number: patHN ...ionCode

PATIENT HISTORY:

List PHM:

List Medical Conditions(s) for which medical cannabis is being sought as treatment:

List of Current Medications: