DECODE INSOMNIA CLINIC
ONTARIO, CANADA

decodeinsomnia@protonmail.com (647) 689-7588 (289)401-8883

REFERRAL FORM

NOTE: *This is a virtual clinic that serves patients ages 13 and older in Ontario, Canada only.*

PATIENT INFORMATION	
Full Name	
Date of Birth	
Email	
Phone	
OHIP (with version code)	
Reason for Referral	Consultation for chronic insomnia and/or sleep timing concerns; assessment for treatment with the DECODE Insomnia programs (paid and OHIP-covered options available)

REFERRING PHYSICIAN INFORMATION			
Name			
Fax		**Billing no.**	
Other contact (optional)			
Signature		**Referral Date**	

Please fax the completed form to 647-689-7588