



AXIS EYE INSTITUTE - DR. NIMA NOORDEH MD, FRCSC

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Referrals@axiseye.ca

- ✓ Cataract & Refractive Surgery
- ✓ Medical Retina
- ✓ Cornea
- ✓ Comprehensive Ophthalmology

PATIENT INFORMATION

FIRST NAME

LAST NAME

PHONE NUMBER

HEALTH CARD NUMBER VC

ADDRESS

DOB

EMAIL ADDRESS

REFERRING CLINIC INFORMATION

CLINIC NAME

REFERRING DOCTOR'S NAME

CLINIC ADDRESS

OHIP BILLING NUMBER

FAX NUMBER

DATE

TRIAGE

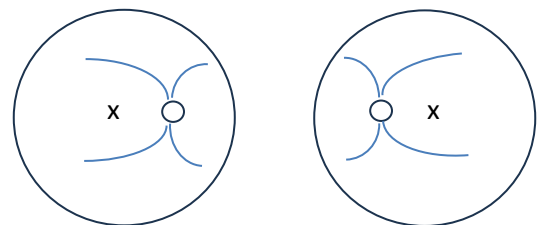
- ☐ URGENT (Within 72 hours) ☐ PRIORITY (1-2 weeks) ☐ NON-URGENT (1-4 months)

REASON FOR REFERRAL (please circle all that apply)

CATARACT	RETINA	LASERS	GENERAL
OHIP Cataracts	Dry AMD	Glaucoma (SLT)	Glaucoma
Advanced testing & aspheric lens	Wet AMD	Narrow angle (LPI)	Pterygiums
Refractive cataract surgery	Diabetes	PCO (YAG cap)	EBMD/Salzmann
Refractive lens exchange/phakic IOL	Vein Occlusion	Retinal hole/tear	Lid lesions
Other	ERM/VMT	Focal laser/PRP	Other
	Other	Other	

EYE EXAM	OD	OS
Vision		
IOP		
Refraction		

RETINA EXAM



Office Use:

OTHER: