



# Referral Form for Learning the Ropes for Living with MCI®

Please fax referral to **647-788-2199**.

Incomplete referrals will result in delay of services as they cannot be processed until all information is received.

| Client information  |              |                            |                                |
|---|--------------|----------------------------|--------------------------------|
| Client name   |              | Date of birth (dd/mm/yyyy) |                                |
| Client address  |              | City                       | Postal code                    |
| E-mail address (if client has agreed to be contacted by e-mail) |              |                            |                                |
| Home phone  | Other phone  | Health card number         | Version code                   |
| Emergency contact name  | Phone number | Relation to client         | Who should be contacted first? |

- **Has the client been diagnosed with amnesic MCI** (i.e., memory worse than expected for age, normal ADLS and iADLs, no dementia)? Yes No
- **Has the client been informed of and consented to referral?** Yes No

| Referring source information                        |           |     |
|---|-----------|-----|
| Name of referring physician/healthcare professional | Telephone | Fax |
| Date of referral (dd/mm/yyyy)                       |           |     |

### Program information:

- This program is for older adults with amnesic MCI and their family members/friends. It is focused on optimizing cognitive health through lifestyle choices, memory training, and psychosocial support. There is a program fee; the program does not turn away anyone who is unable to pay the fee.
- All referrals are processed through Central Registration. Please fax only to 647-788-2199.
- For questions about the referral process, please call Central Registration at 416-785-2500 x2100.
- For questions about the program, visit [www.baycrest.org/ltr](http://www.baycrest.org/ltr) or call the Neuropsychology and Cognitive Health Program at 416-785-2500 x2445.