

PRE-SCREEN FOR REFERRALS TO DR. GORDON KO M.D.

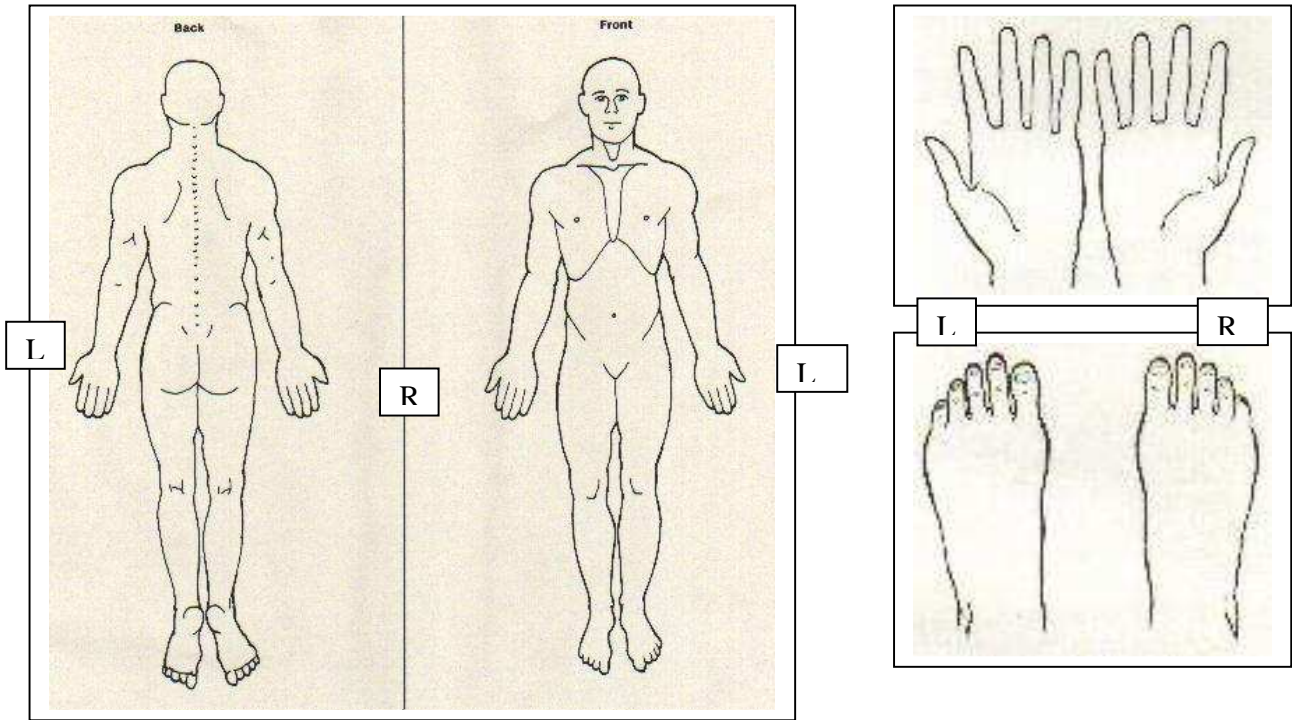
INSTRUCTIONS: By completing this questionnaire, you will likely be able to see Dr. Ko faster than the usual waiting time of > 12 months. It would help his staff fit you into the most appropriate clinic. Note that a referral letter from your doctor (MD) + lab / x-ray results are required before an appointment will be made.

PLEASE COMPLETE THE FOLLOWING QUESTIONS AND PRINT CLEARLY:

1. Your name: _____ Daytime telephone#: _____

2. Draw-circle where you have your symptoms that need treatment:

Use the following symbols: xxx **PAIN** 000 **NUMBNESS** zzz **PINS & NEEDLES** www **WEAKNESS**



Besides pain, check if you have: **fatigue** **waking unrefreshed** **concentration problems** headaches
 depression abdominal pain skin changes swollen joints autoimmune disease diabetes cancer

3. Did your symptoms develop after an accident or injury? No Yes: Date of onset: _____

3b. If Yes, are there ongoing **medicolegal issues**? Disability claim Motor vehicle accident

Personal injury claim Worker's Compensation (Dr. Han clinic) Other: _____

There are NO medicolegal issues (no third party insurance or lawyer involved)

3c. Is your medicolegal claim still active (i.e. getting medication and physio covered)? No Yes

4. Do you have **extended health care** benefits? No Yes: name of insurer: _____

I am on social assistance I am on / applying for ODSP (Ontario Disability Support Program)

5. Your age: ____ yrs. Smoking? No Yes Alcohol? No Yes: # drinks? ____/day and ____/week

Used marijuana/ street drugs this past year? No Yes Personal /family history of addiction? No Yes

Current medications (please list):

6. I would be interested in being seen for:

Platelet-rich Plasma injections/ Prolotherapy (as recommended by my therapist PT/ DC: _____)

Botox injections for: migraine cervical dystonia post-stroke spasticity chronic pain

Synvisc for osteoarthritis Botox, juvederm for wrinkles (cosmetic clinic with Dr. Hum/ Koprowicz)

Functional Medicine (science-based nutrition, bioidentical hormone replacement) with Leigh Arseneau ND

EMG/ nerve conduction studies Quantitative Sensory Testing (QST) for neuropathic pain

Independent medical legal exam (→ **contact FASTEC at 905 475-8386**) Other: _____

Upon completion, please FAX to Jean at: 905 471-4348. You will be contacted accordingly.