

**REFERRAL** 



St Andrew's War Memorial Hospital Level 4, 457 Wickham Terrace Brisbane Q 4001 GPO Box 764 Brisbane Q 4001

P 07 3834 4285

F 07 3834 4291

E enquiries@standrewspainservice.com.au

W www.standrewspainservice.com.au

Referral Date:		
PATIENT DET	TAILS	
Name:		Date of Birth:
Address:		
Email:		
Phone:		Mobile:
Medicare #		Private Health Cover: Yes No No
Fund Membership	) #	
REFER TO		
☐ StAMPS or	<ul><li>□ Dr Jason Ray</li><li>□ Dr Jayne Berryman</li></ul>	☐ Dr Richard Pendleton ☐ Dr Wilbur K. M. Chan☐ Dr Christian A.C. Rowan
CLINICAL NO	OTES	
Pain Problem & D	Ouration:	
Previous Treatmen	nt:	
Other Specialists	Consulted:	
Comorbidities:		

## REFERRING DOCTOR

Imaging Performed

Name:

Provider#

Date:
Phone:

Please Tick ☐ Email report ☐ Fax report ☐ Post report

Please advise patient to bring all imaging & medications to consultation.





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## WHERE TO FIND US

St Andrew's War Memorial Hospital 457 Wickham Tce Spring Hill Q 4001 Entrance at hospital reception, Wickham Terrace.

## P PARKING

St Andrew's Place Car Park (North St)

Hospital Car Park (North St)

Secure Parking 55 Little Edward St (entrance on Hope St)

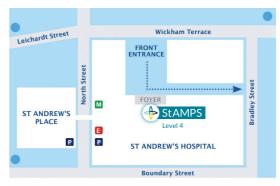
Wilson Parking 433 Boundary St (entrance on Fortescue St)



Spring Hill Loop BCC bus from city to hospital.



To Central Station, then Spring Hill bus to hospital.





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