

hyperbarichealth woundhospitals

Referral Form

We provide wound dressings and hyperbaric treatments.
Our facilities are accredited and licensed private hospitals.
Hyperbaric Health have contracts with all major health funds and DVA.
Some indications incur no out of pocket costs to patients.

HH Internal Use Only:

CRM >
'WH HP Referral Form'

Patient Details

Name.....
Address.....
.....Post Code.....
Tel D.O.B..... Medicare No.....

Diagnosis

Diabetic Wound Non Diabetic Wound Radiation Injury
 Hypoxic Tissue Compromised Tissue (e.g. surgical flaps or grafts)
 Other

Medical History

Please include diagnostic tests
and other relevant facts (such
as assessment and referrals)
on extra pages if required.

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Referring Practitioner

Name.....
Practice Address
.....Post Code.....
Tel Fax.....
Medicare Provider No. Referral Duration.....
Signature Date.....

Hyperbaric Treatment only (I will retain the dressing care for this patient)

Located at: St. John of God Hospital, 3 Gibb Street, **Berwick** VIC 3806
Ph: **03 9707 1420** Fax: 03 9707 1860 Email: berwick@hyperbarichealth.com

Located at: LaTrobe Private Hospital, Level 2, Cnr. Plenty Rd & Kingsbury Drive, **Bundoora** VIC 3083
Ph: **03 9383 6505** Fax: 03 8587 2489 Email: bundoora@hyperbarichealth.com

Located at: Ground Floor, 46-50 Kent Road, **Mascot** NSW 2020
Ph: **02 9578 0000** Fax: 02 9578 0050 Email: sydney@hyperbarichealth.com