



211 – 284 Helmcken Rd, Victoria BC, Canada V9B 1T2
Ph: 250-595-5905 Fax: 250-595-5907 www.helmckenpainclinic.com

Request for Consultation

Date: _____

Please review the inclusion and exclusion criteria and important guidelines on the next page

Incomplete referrals will be returned

Patient Information (Name, DOB, PHN, address, phone required, email requested)	Referring Physician (Name, MSP#, address required)
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<u>Service requested</u> ☐ Complex chronic pain consultation ☐ Regenerative medicine consultation**	<u>Diagnosis</u> ☐ Spine pain (axial skeletal) ☐ Acute radiculopathy (< 6 mo) ☐ Chronic radiculopathy (> 6 mo) ☐ Spinal stenosis (non-surgical) ☐ Other	☐ Neuralgia / neuritis ☐ CRPS ☐ Headache
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** Regenerative medicine consultation and procedures are private pay only.

Brief clinical history including pain location and provisional diagnosis

☐ Separate letter is attached.

Duration of pain symptoms: ☐ < 12 months ☐ > 12 months

☐ WCBC / WCB related - WSCB claim #: _____

☐ Patient was previously seen at a chronic pain clinic such as the RJH or NRGH - *(Please attach reports if available. If the pain clinic was in another province, please ask the patient to bring copies of their reports to their appointment)*

Past medical history, medications, etc. ☐ Nil or ☐ Chart Summary or separate letter is attached.	☐ Latex allergy ☐ Contrast allergy ☐ Anticoagulation ☐ BMI > 40 ☐ ASA class III or above ☐ Pregnant
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Investigations Please attach relevant imaging reports. <i>All axial pain consultations and procedures require MRI or CT of the relevant area. If not already done, please request one</i>



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Please read the following important information

- (1) The Helmcken Pain Clinic is accredited by the CPSBC Non-Hospital Medical Surgical Facilities Accreditation Program (NHMSFAP) for Procedural Pain Management – Advanced I and II as well as cervical epidural, cervical transforaminal nerve root and deep cranial nerve blocks.

Per the CPSBC NHMSFAP, we are not able to perform Advanced I or II procedures (generally spine injections, cranial nerve blocks and nerve ablations) on patients in the following categories:

- BMI > 40
- ASA class > 2

These patients must be referred to a Health Authority Pain Clinic or Radiology Department for injections.

- (2) Urgent requests require direct physician to physician contact.
- (3) Upon review, receipt of referral will be confirmed via fax to referring physician's office. An approximate wait for the appointment will be indicated. Patients will be contacted by our office directly to schedule appointments. If you did not receive a confirmation fax then the request was not received.
- (4) Do not refer patients to more than one chronic pain program at the same time. This leads to longer wait lists and unnecessary duplication of service. Please advise us if your patient is seen at another pain clinic after this referral has been submitted so the space can be reassigned to another patient on our waitlist.
- (5) The Helmcken Pain Clinic physicians will not take over prescribing opioids or other medications. We may make recommendations, but implementation is at the referring or family physician's discretion.
- (6) Patients are required to be active participants in their pain management strategies. All treatments require active physical rehabilitation.
- (7) Patients will be assigned to a physician based on the information provided. If you are requesting a specific physician, please indicate on the form. Specific requests cannot be guaranteed and will increase the wait time.
- (8) Regenerative medicine consultation and procedures are private pay only
- (9) We do not see patients for long term soft tissue (trigger point injections)
- (10) Patients on high dose opioids generally do not respond well to interventional pain procedures.