



Shine^{MD}



The Acne Clinic

REFERRAL FORM PRIMARY CARE SKIN CONCERNS (GP DERMATOLOGY) AND ACNE CLINIC

A referral for MSP based Physician assessment is required. However, **this form is not mandatory**. You may also send a referral through your EMR.

FAX REFERRALS TO 604.648.8342. Our office will contact the patient directly.

PHYSICIAN INFORMATION OR STAMP

Date:	MSP #:
Name:	FAX:

PATIENT INFORMATION

Name:	Address:
PHN:	Phone:
DOB:	Email:

REFER TO

- ☐ Dr. Mona Khurana (MSP 67355) ☐ Dr. Alisha Moosa (MSP 35104)
☐ First Available

MSP BASED SERVICES

- ☐ Acne (including isotretinoin treatment) ☐ Actinic Keratosis ☐ Warts ☐ Melasma
☐ Lesion/Mole Assessment and Biopsy ☐ Facial Pigmentation Concerns ☐ Rosacea

Reason for referral:

NON-MSP BASED SERVICES

If appropriate, please send a referral for initial assessment and diagnosis. Otherwise consult fees apply.

- ☐ Acne Treatment (BBL, Forever Clear, AviClear) ☐ Facial Rejuvenation (Aesthetic Medicine) ☐ Hair Related Concerns (PRP)
☐ Hyperpigmentation Treatment (Multimode) ☐ Migraines and Hyperhidrosis (Botox) ☐ Keloid Scar Treatment
☐ Vascular Lesions (Cherry Angiomas, Telangiectasias) ☐ Scar Treatment (Acne, Other) ☐ Wart Treatment
☐ Skin Lesion Removal (Moles, Skin Tags, Seborrheic Keratosis)



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