



Dr. David Fahmy, MD FRCPC
 Assistant Clinical Professor
 Department of Medicine
 Division of Clinical Immunology & Allergy

McMaster Downtown Ambulatory Care Clinic
 David Braley Health Sciences Centre
 100 Main Street West, 4th Floor
 Hamilton, ON L8P 1H6
 ☎ (905) 525-9140 x 24881
 📠 (905) 527-8847

ALLERGY, ASTHMA, & CLINICAL IMMUNOLOGY

Reason for referral (check all that apply):

- | | | |
|--|---|---|
| <input type="checkbox"/> Asthma | <input type="checkbox"/> Eczema | <input type="checkbox"/> Other drug allergy |
| <input type="checkbox"/> Allergic rhinitis | <input type="checkbox"/> Urticaria | <input type="checkbox"/> Eosinophilic esophagitis |
| <input type="checkbox"/> Food allergy | <input type="checkbox"/> Anaphylaxis | <input type="checkbox"/> Immunodeficiency |
| <input type="checkbox"/> Stinging insect allergy | <input type="checkbox"/> Penicillin allergy | <input type="checkbox"/> Other (specify below) |

Reason for referral/diagnosis: _____
 Current Medications: _____
 (List or Attach)

PATIENT INFORMATION

Last	First	<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms.
Address:		City
		Postal Code
email	Home Phone	Mobile
Date of Birth	OHIP #	

PHYSICIAN INFORMATION

Referring Physician:	Phone Number:
Address:	Fax Number:
Billing Number:	CC to Family Doctor (if different):
Signature:	Family Doctor Phone:

Important: Patients must discontinue all antihistamines (including Graval and Dymista) at least 4 days prior to their appointment.
 Other nose sprays and inhalers do not affect testing and can be continued as prescribed.

PLEASE FAX ALL REFERRALS TO 905.527.8847

PATIENTS NEEDING TO BE SEEN AT THE MCMASTER HOSPITAL SITE WILL BE NOTIFIED