BARWON HEALTH

SMOKING CESSATION REFERRAL FAX SHEET

PATIENT LABEL REQUIRED HERE

REFERRAL DETAILS (please tick preferred clinic)

☐ **Belmont**	☐ **Corio**	☐ **Newcomb**	☐ **Torquay**
1-17 Reynolds Road	2 Gellibrand Street	104-108 Bellarine Highway	100 Surfcoast Highway
Belmont VIC 3216	Corio VIC 3214	Newcomb VIC 3219	Torquay VIC 3228
Phone: 03 5260 3778	Phone 03 5260 3800	Phone: 03 5260 3333	Phone: 03 5260 3900
Fax: 03 5260 3780	Fax 03 5260 3856	Fax: 03 5260 3444	Fax: 03 5261 3794

Date:

Referred by (please provide full name):

Position: **Department:**

Phone number: **Email:**

Please note: *The information in this fax is confidential and only intended for the Barwon Health Smoking Cessation Clinic. If you have received this fax in error please contact the sender. You must not copy, distribute, take any action on, or disclose any details of the information in this fax to any other person or organisation.*

PATIENT / CLIENT DETAILS (including consent)

Surname: **First name:**

Gender: ☐ **Female** ☐ **Male** **DOB:**

Home phone: **Work phone:** **Mobile:**

Messages from the Smoking Cessation Clinic may be left? ☐ Yes ☐ No

I agree to receive a call from the Barwon Health Smoking Cessation Clinic ☐ Yes ☐ No

Signature of patient/client **Verbal consent given** ☐ Yes ☐ No

CLINICAL INFORMATION

Readiness to quit smoking
Please ask the client how they would rate their readiness to quit on a scale of 1 to 10. Please record the response on the scale below:

0 1 2 3 4 5 6 7 8 9 10

Not at all — As ready as I will ever be

Previous quit attempts (Please briefly describe, including number of attempts and methods used)

Current medications (Please record)

Comorbidities / client issues

Please tick relevant conditions / client issues?

☐ Respiratory/lung disease ☐ Diabetes ☐ Mental illness (please specify)________________

☐ Other substance use ☐ Pregnancy ☐ Concern about children's health

☐ Planned surgery ☐ Heart Disease ☐ Other (please specify): ________________

Other clinical notes (Please attach a medical health summary if available)

TOTALLY SMOKE FREE
Providing a healthier, cleaner and safer environment

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BHS20142

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