CancerCare Manitoba
ActionCancerManitoba

Central Referral Office
Send Referrals by Fax: 204-786-0621
For Inquiries Call: 1-844-320-4545

CancerCare Referral Form: Genito-Urinary

Referral Date:

REFERRAL INSTRUCTION

- A complete referral **must include**:
  a. This referral form
  b. Referral letter including history of present illness, past medical history, and medication list
  c. Disease site-specific referral requirements on page 2 of this form
- Incomplete referrals will be returned
- Patient must be aware of referral to CancerCare Manitoba
- If the referral is emergent, please phone the "on call" medical or radiation oncologist, gynecologic oncologist, surgical service or hematologist through paging for Health Sciences Centre at 204-787-2071 or St. Boniface Hospital paging at 204-237-2053.

PATIENT INFORMATION

Surname: Given name & initial: Previous name(s): Preferred name (if different from given name): DOB: PHIN: Need for an interpreter? ☐ Yes ☐ No Specify language:	Address: City: Postal Code: Preferred Phone: Emergency contact/support person name: Relationship: Preferred phone:

REFERRAL INFORMATION

Diagnosis: ☐ Presumptive ☐ Confirmed Reason for consultation: ☐ New diagnosis ☐ Recurrent/progressive disease	Referring health care provider: Surgeon (if applicable): Primary care provider: In-patient? ☐ Yes ☐ No Hospital-specify unit: Unit phone:

Please see page 2 for required criteria

Central Referral Office
Send Referrals by Fax: 204-786-0621
For Inquiries Call: 1-844-320-4545

Genito-Urinary Oncology Referral Requirements

REQUIRED INFORMATION TO COMPLETE PATIENT TRIAGE

If this is an urgent consult, please page on call physician at CCMB.

1. Prostate
   - ☐ PSA within the last 3 months
   - ☐ CT chest, abdomen, pelvis (Date ordered: _____)
     (MUST SPECIFY for CANCER staging on imaging requisition)**
   - ☐ Bone scan (date ordered: _____)

   ** If you have isolated elevated PSA that has not yet been worked up, please send this consult to the Manitoba Prostate Centre. If there is evidence of metastatic disease without pathology, please send to CancerCare Manitoba and Manitoba Prostate Centre as well as order CT chest, abdomen, pelvis and a bone scan.

2. Urothelium (Renal pelvis, Ureter, Bladder and Urethra)
   - ☐ CT Chest, abdomen and pelvis **OR** Pelvic/bladder ultrasound
   - ☐ Pathology

   ** If there is a new urothelial lesion that has not yet been worked up, please send this consult to Urology and **NOT** CancerCare Manitoba.

3. Renal
   - ☐ CT Chest, Abdomen and pelvis **OR** Renal/Abdominal Ultrasound showing renal lesion
     (Date ordered: _____)
     (MUST SPECIFY for CANCER staging on imaging requisition)
   - ☐ Pathology

   ** If there is a new renal lesion that has not yet been worked up, please send this consult to Urology and **NOT** CancerCare Manitoba.

4. Testicular
   - ☐ Testicular ultrasound
   - ☐ Pathology
   - ☐ CT chest, abdomen and pelvis and tumor markers (AFP, BHCG, LDH)
     ** (MUST SPECIFY for CANCER staging on imaging requisition)**

   ** If there is a new testicular lesion that has not yet been worked up, please send this as an **URGENT** consult to Urology and **NOT** CancerCare Manitoba.

5. Penile
   - ☐ CT chest, abdomen and pelvis (MUST SPECIFY for CANCER staging on imaging requisition)
   - ☐ Pathology

   ** If you have a new penile lesion that has not yet been worked up, please send this consult to Urology and **NOT** CancerCare Manitoba.

NOTE: This checklist is provided as a guide and is not intended as clinical guidance

CancerCare Manitoba
ActionCancerManitoba

Central Referral Office
Send Referral by Fax: 204-786-0621
For inquiry, call: 1-844-320-4545

List of Urologists

Physician Name	Specialty	Location	Phone	Fax
DR. A. AHMAD	ONCOLOGY	ST. BONIFACE HOSPITAL	204-258-1141	204-231-0148
DR. J. OFFERNI	UROLOGY/KIDNEY-PANCREAS TRANSPLANT	ST. BONIFACE HOSPITAL	204-235-3713	204-231-0148
DR. J. NAYAK	ONCOLOGY	ST. BONIFACE HOSPITAL	204-235-3496	204-231-0148
DR. DAVE MAHARAJ	GENERAL UROLOGY	COMMUNITY UROLOGISTS	204-831-9525	204-831-7070
DR. ANDRE MATTELIANO	GENERAL UROLOGY	COMMUNITY UROLOGISTS	204-957-3367	204-282-9404
DR. DARRYL DRACHENBERG	GENERAL UROLOGY	COMMUNITY UROLOGISTS	204-788-5755	204-784-4137
DR. TAD KROCZAK	GENERAL UROLOGY	COMMUNITY UROLOGISTS	204-237-2726	1-855-407-1647
DR. BRENDA HILDEBRAND	GENERAL UROLOGY	COMMUNITY UROLOGISTS	204-237-2726	204-231-0148
DR. MARAT RAFIKOV	GENERAL UROLOGY	COMMUNITY UROLOGISTS	204-958-6739	204-783-6769
DR. PATRICK CHO	GENERAL UROLOGY	COMMUNITY UROLOGISTS	204-958-6739	204-783-6769
DR. SABEER REHSIA	GENERAL UROLOGY	COMMUNITY UROLOGISTS	204-958-6739	204-783-6769
DR. JOHN MILNER	GENERAL UROLOGY	COMMUNITY UROLOGISTS	204-958-6739	204-783-6769
DR. VLADIMIR RUZHYNSKY	GENERAL UROLOGY	COMMUNITY UROLOGISTS	204-957-3271	204-947-0450
DR. BRIAN RITCHIE	GENERAL UROLOGY	COMMUNITY UROLOGISTS	204-415-9022	204-415-9033
	PROSTATE CANCER	CANCER CARE MANITOBA	204-787-4461	204-786-0637
DR. BRIAN PETERS	STONES	HEALTH SCIENCES CENTRE	204-787-8952	204-787-3040

DR. GREG HOSIER	BENIGN UROLOGY/STONES	HEALTH SCIENCES CENTRE	204-787-8950	204-787-3040
DR. PREMAL PATEL	MALE HEALTH/INFERTILITY	HEALTH SCIENCES CENTRE	204-787-8520	204-787-3040
DR. ERIC SALTEL	BENIGN UROLOGY/RECONSTRUCTION	HEALTH SCIENCES CENTRE	204-787-8582	204-787-3040
DR. JEFFREY SARANCHUK	ONCOLOGY	HEALTH SCIENCES CENTRE	204-787-8951	204-787-3040
Dr. Premal Patel	MALE INFERTILITY/SEXUAL MEDICINE	MENS HEALTH CLINIC	204-221-4476	1-833-333-1476
Dr. Jay Nayak	ONCOLOGY	MENS HEALTH CLINIC	204-221-4476	1-833-333-1476
Dr. Hesma Van Heerden	GENERAL UROLOGY	MENS HEALTH CLINIC	204-221-4476	1-833-333-1476
Dr. Robert Bard	GENERAL UROLOGY	MENS HEALTH CLINIC	204-221-4476	1-833-333-1476