

**DR. RUBEENA KHAN**  
**ANCASTER CENTRAL PEDIATRIC CLINIC**  
4-1015 Golf Links Rd., Ancaster, L9K 1L6 (inside Ancaster Central Pharmacy)  
Phone 289 808 2230 Fax 289 919 2511  
Alternate Line: 905 304 8881

**REFERRAL FORM**

**Patient details:**

**Name:** \_\_\_\_\_  
**DOB:** \_\_\_\_\_  
**HCN:** \_\_\_\_\_  
**Contact:** \_\_\_\_\_  
**Address:** \_\_\_\_\_

**Pediatric Service: (Please circle around the service required)**

- Cardiology**
- Pediatric or Adolescent Behavioural and Mental Health**
- Newborn Care**
- Developmental Evaluation**
- Autism Assessment**
- General Pediatric Assessment**

**Reason for referral:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Referring Dr:** \_\_\_\_\_

**Billing #** \_\_\_\_\_

**Clinic Info:** \_\_\_\_\_

