

# High Risk Dry Age-related Macular Degeneration (AMD) Clinic Referral

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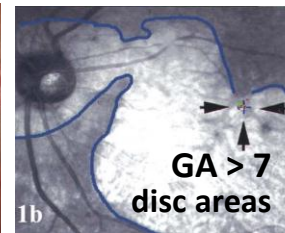
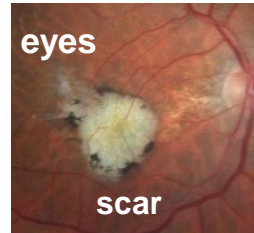
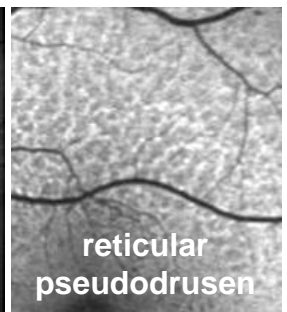
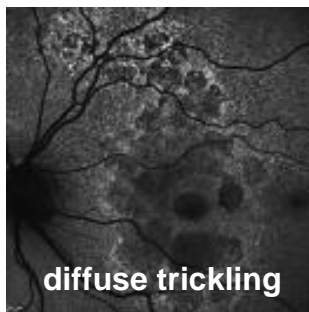
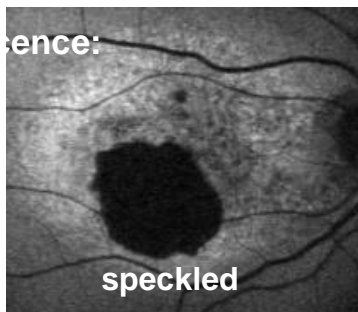
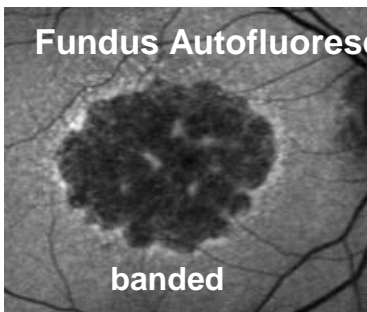
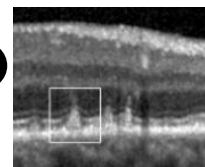
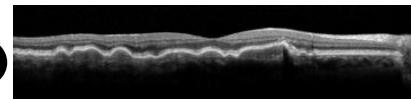
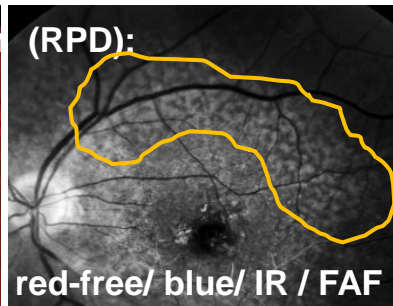
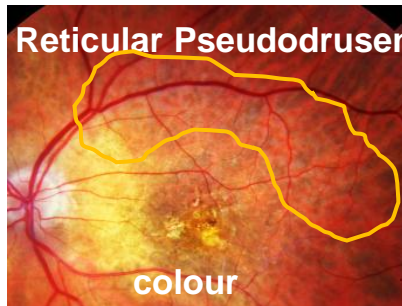
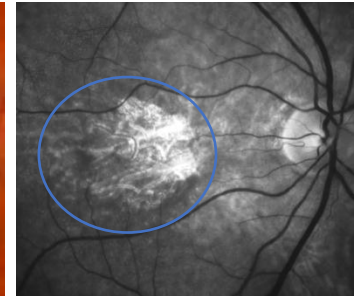
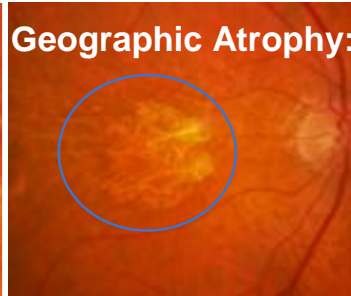
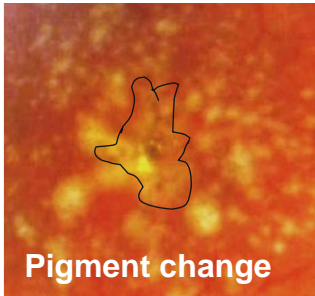
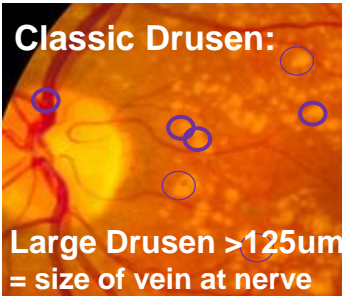
St. Michael's

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**If CNVM is detected, patients will be returned to referring doctor for ongoing care  
 Intravitreal injections will NOT be performed at this clinic**

TICK  
 all that  
 apply



**Ineligibility Criteria:**

CNVM, fibrovascular scar,  
 GA > 7 DA in **both eyes**

Diabetes is **NOT** an exclusion  
 criteria

Date: \_\_\_\_\_

Referring OD/MD: \_\_\_\_\_ FAX: \_\_\_\_\_

OHIP Billing No. \_\_\_\_\_

Patient NAME: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Postal: \_\_\_\_\_

Phone numbers: (1) \_\_\_\_\_ (2) \_\_\_\_\_

DoB: \_\_\_\_\_ OHIP #: \_\_\_\_\_