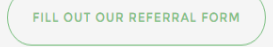
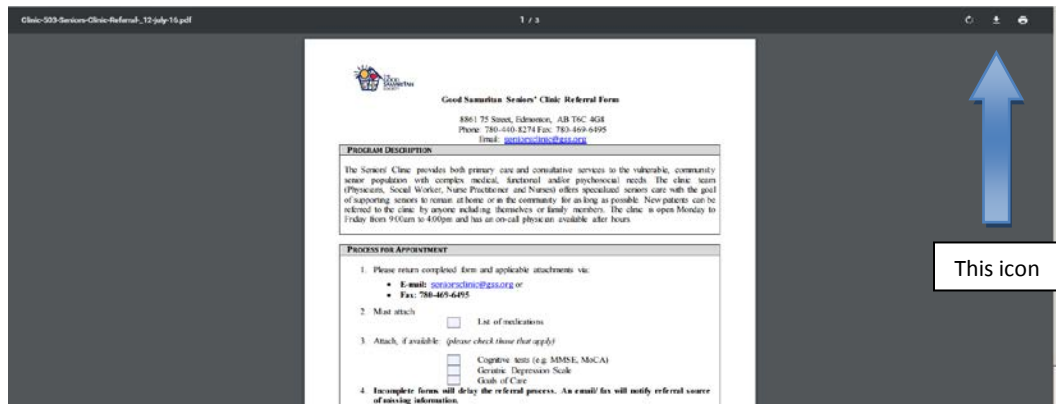


## Good Samaritan Seniors' Clinic Online Referral Form Help

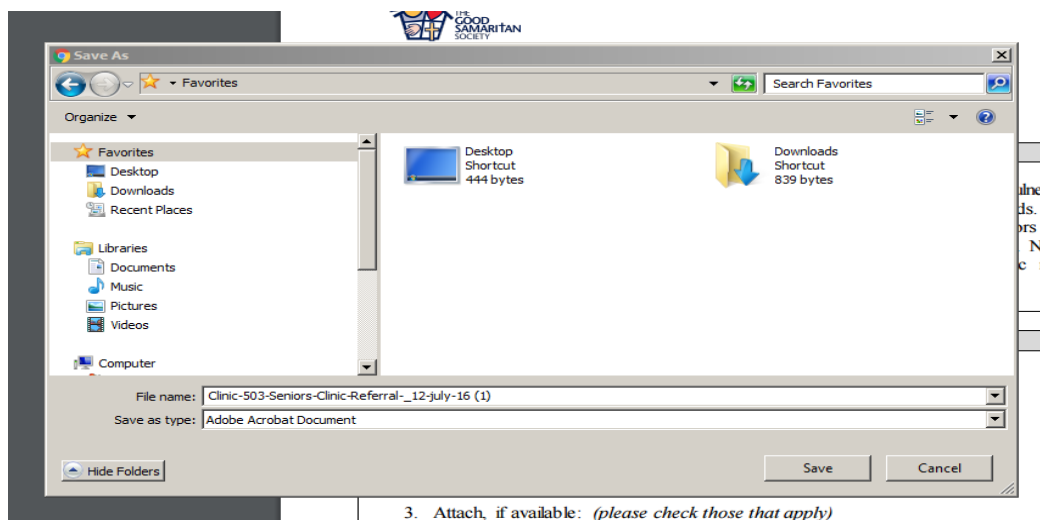
### To download the pdf file on your computer

**Note: Ensure there is Adobe Reader version 8 or higher installed on your computer to download the pdf file**

1. Click on the  button on the GSS website
2. Click on the download icon found on the top right hand side of the window



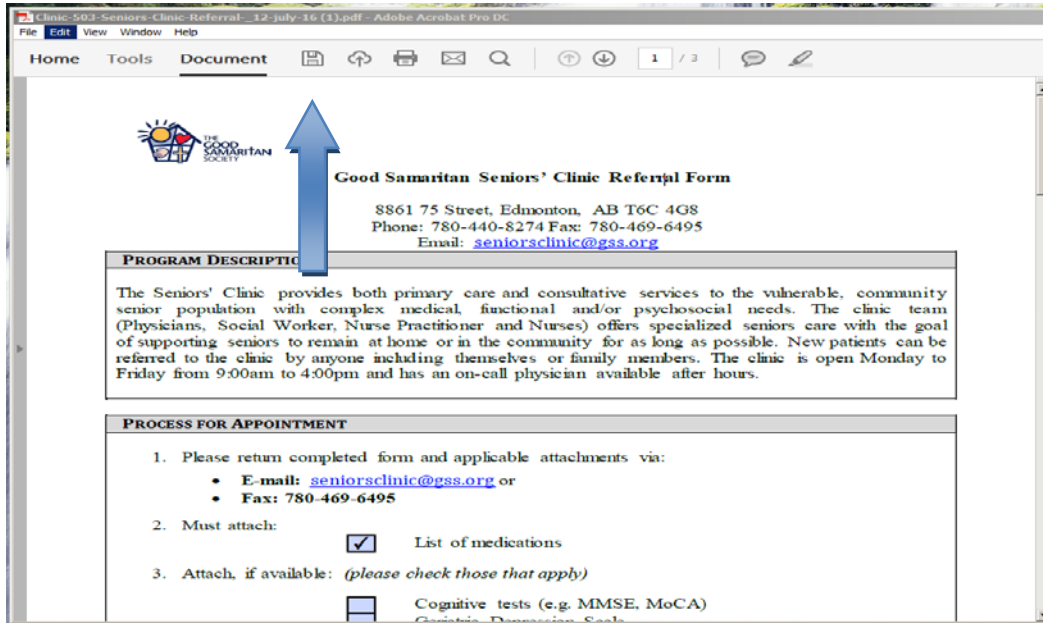
3. A "Save As" window will appear on the screen



4. Click the Save button to save the pdf file on your computer (*ensure to save the file where you can easily find it*)


## To open and complete the referral form

1. Locate the saved pdf file on your computer and double click to open
2. Fill out and complete the Good Samaritan Seniors' Clinic Referral Form then click on the disk icon to save the completed form



Adobe Acrobat Pro DC - Clinic-503-Seniors-Clinic-Referral-12-july-16 (1).pdf

Home Tools Document

 **Good Samaritan Seniors' Clinic Referral Form**

8861 75 Street, Edmonton, AB T6C 4G8  
Phone: 780-440-8274 Fax: 780-469-6495  
Email: [seniorsclinic@gss.org](mailto:seniorsclinic@gss.org)

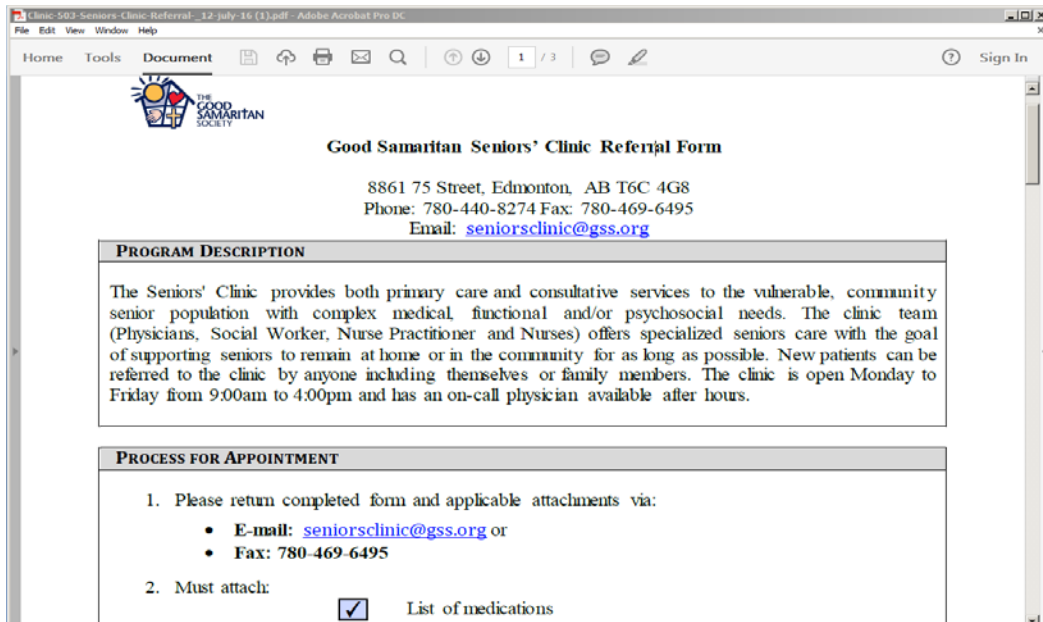
**PROGRAM DESCRIPTION**

The Seniors' Clinic provides both primary care and consultative services to the vulnerable, community senior population with complex medical, functional and/or psychosocial needs. The clinic team (Physicians, Social Worker, Nurse Practitioner and Nurses) offers specialized seniors care with the goal of supporting seniors to remain at home or in the community for as long as possible. New patients can be referred to the clinic by anyone including themselves or family members. The clinic is open Monday to Friday from 9:00am to 4:00pm and has an on-call physician available after hours.

**PROCESS FOR APPOINTMENT**


1. Please return completed form and applicable attachments via:
  - E-mail: [seniorsclinic@gss.org](mailto:seniorsclinic@gss.org) or
  - Fax: 780-469-6495
2. Must attach:
  - List of medications
3. Attach, if available: *(please check those that apply)*
  - Cognitive tests (e.g. MMSE, MoCA)

3. Click on the X button found on the top right of the form to close



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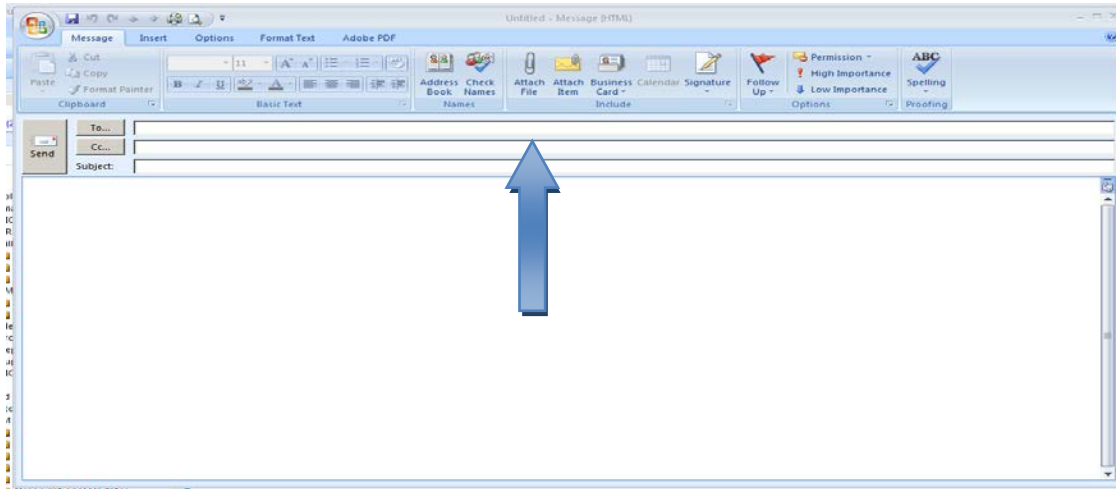
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  - Fax: 780-469-6495
2. Must attach:
  - List of medications

## To send the completed referral form to Good Samaritan Seniors' Clinic

**Note:** For this example Microsoft Outlook is used to send the referral form

1. Create a new email message using your email account (i.e.: gmail, hotmail, yahoo, etc)
2. Attach the completed referral form in the email by clicking the paper click icon



3. Once the pdf file is attached, send the new email message to [seniorsclinic@gss.org](mailto:seniorsclinic@gss.org) and enter "Referral Form" in the subject line then click on the Send button to send.

