



Surrey Breastfeeding Clinic

Unit #606 - 13761 96 Avenue, Surrey, BC

Fax: (604) 677-6119

Phone: (236) 477-8927

EMAIL: info@lunamidwiferycare.ca

Surrey Breastfeeding Clinic

Date of referral: _____ Referring MD/ RM : _____

MSP billing # _____ Contact information: _____

Patient name: _____

PHN: _____

Date of birth: _____

Phone: _____

Patient's address: _____

Patient's email _____

Baby's name: _____ M / F

PHN: _____

Date of birth: _____

Gestational age at birth: _____

Birth weight: _____

Recent weight _____. Date _____

Mode of delivery: _____



Reason for referral:

Refererr: Please fill and fax to client's GP office

GP office: Fill first box and fax to (604) 677-6119

Note: MSP covers care up until 6 weeks of age only.



Please note: Patient will be contacted directly to book an appointment as soon as possible.