

Orthopaedic Referral

Date _____

Patient

Family name _____

First names _____

Date of Birth _____

Gender Female Male

Address _____

Post Code _____

Telephone _____

Mobile _____

Email _____

Referring doctor

Dr _____

Provider No. _____

Practice name _____

Address _____

Post Code _____

Telephone _____

Email _____

Signature _____

Date _____

Clinical findings

Please attach any relevant reports.

Dr Brian Loh

M.B.B.S, F.R.A.C.S, F.A.Ortho.A.
ORTHOPAEDIC SURGEON

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T. 03 9322 3310
F. 03 9012 4497

East Melbourne

Hip Dysplasia, Fracture & Sports Injury Clinic, St Vincent's Private

Suite 50, Level 5,
141 Grey Street,
East Melbourne VIC 3002

Malvern

Cabrini Mother & Baby Centre

Area E, Level 2,
181-183 Wattletree Road,
Malvern 3144

North Melbourne

Victorian Orthopaedic Centre

64 Chapman Street,
North Melbourne 3051

Dr Loh treats these adult orthopaedic conditions:

Trauma

Fractures: comprehensive management of adult trauma

Hip Conditions

Management of Hip arthritis

Total Hip Replacement

Adult sequelae of Developmental Dysplasia of the hip (DDH)

Adult sequelae of Perthes Disease

Adult sequelae of Slipped Capital Femoral Epiphyses (SCFE/SUFE)

Knee Conditions

Knee arthritis

Patello-femoral arthritis

Sports Knee Conditions

Patella Instability

Knee ligament injuries

Meniscal injuries

Foot and Ankle Conditions

Arthritis

Ankle instability

Cavovarus feet

Pes Planovalgus (Flatfeet)