



B.I.A.P.R.
Brain Injury Association
Peterborough Region

158 Charlotte Street
Peterborough, ON K9J 2T8
Phone – 705-741-1172
Toll Free – 1-800-854-9738
Fax – 705-741-5129
Email – biapr@nexicom.net
www.biapr.ca

ABI-Link® - Professional

ABI-Link® - Professional is a service provided to Primary Care Professionals from the Brain Injury Association Peterborough Region (A registered business name of Four Counties Brain Injury Association).

Date of Referral: _____ Referred By: _____ (Print Name)

Personal Information

Individual's Name: _____ **Gender:** M _____ F _____
Last, First

Date of Birth: _____ **Health Card #** _____
(mm/dd/yyyy)

Address: _____ **City:** _____, ON

Postal Code: _____ **Phone #** _____ **Cell #** _____

Name of Family Doctor: _____ **Phone #** _____

Does individual with ABI have a legal Power of Attorney? Yes _____ No _____

Brain Injury Information

Cause of Injury (eg. Anoxia, Assault, MVA, Fall, etc.): _____ **Date of Injury:** _____

Diagnosis (ABI and / or other):

Treatment History

Please include a brief statement of medical interventions, other services involved, or current referrals to other services:

Are you willing to support this person as required for medical issues based on BIAPR referral? **YES** ___ **NO** ___

Reason for Referral (Indicate the areas of support or strategies that you recommend):

- _____ **Cognitive** (memory, attention, organization, problem-solving, time management)
- _____ **Daily Living Skills** (learning new ways to budget, do household tasks for independence)
- _____ **Communication Skills**
- _____ **Strategies to use / prepare for continuous learning**
- _____ **Peer Support** (social skills in group settings)
- _____ **Service Coordination** (access to ODSP, claims for financial support, legal matters)

Care Professional Signature: _____

Regulated Health Designation (If Applicable): _____

Contact #: _____

Please NOTE – We do NOT provide Clinical or Crisis Intervention Services

PHIPA Guidelines are followed, so please do NOT send referral by Email.
Your confidentiality is our priority! Please forward to -

Fax #705-741-5129 or mail directly to our Peterborough office.

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