



Centre for Pain and Disability Management (CPDM)

Referral Form

Please Note: CPDM is an outpatient, rehabilitation self- management program. Clients referred should have all pain related medical investigations completed, be able to attend the program 4 days per week from 9:00 AM – 3:00 PM for a five week period, and be able to participate in individual and group education sessions.

(Clients who are currently dealing with acute psychosis or drug addictions, or who are actively suicidal are not appropriate).

Medical/Pain History: _____

Current Medications: _____

Referring Health Professional: _____

Address: _____ Telephone #: _____

Date of Referral: _____

Fax completed referral form to 777-7046 or mail to: CPDM, 4TH. Floor, Southcott Hall, 100 Forest Road, St.John’s, A1A 1E5

For Office Use Only

Date referral received: _____

Client Name: _____
MCP#: _____
Phone # _____
Mailing Address: _____

