



RETINA ASSOCIATES

CHATSWOOD RETINA SERVICE

www.retina.com.au

Level 4, 8 Thomas Street
Chatswood, NSW 2067

Tel (02) 9411 3333

Fax (02) 9413 3825

REFERRAL

Dr Alex P Hunyor
Surgical & Medical Retina

Dr I-Van Ho
Surgical & Medical Retina

Dr Alexander B L Hunyor
Medical Retina

Dr James Wong
Medical Retina & Uveitis

Dr Robert Chong
Medical Retina

Dr Christine Younan
Medical Retina & Uveitis

Dr Samantha Fraser-Bell
Medical Retina & Uveitis

Dr Timothy M Nolan
Medical Retina

Dr Rohan Merani
Medical Retina

Patient

Name: _____

Date of birth: _____ Telephone number: _____

Clinical Information

Please fill in contact details for correspondence:

Referring Doctor / Optometrist

Name: _____

Address: _____

Telephone: _____ Provider No. _____

Signature: _____ Date: _____

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FOR YOUR APPOINTMENT

- Please bring current glasses/sunglasses.
- Please bring a list of medications, and any allergies.
- You are advised not to drive as your pupils will be dilated.
- Name of your GP & Optometrist (full address & phone number)
- Please bring Medicare/Healthfund Card/Pension Card.
- Allow 2 - 3 hours for the first Consultation.

PARKING

- There is a Council car park in Thomas Street and a disabled parking / drop off area in front of the building.