

# Children's Health Clinic

East Calgary Health Centre  
Main Floor, 4715 8 Ave SE  
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Email for appointments only: [appts.childrenshealthclinic@gmail.com](mailto:appts.childrenshealthclinic@gmail.com)  
[www.childrenshealthclinic.ca](http://www.childrenshealthclinic.ca)

Dear Parent/s:

**Re: Children's Health Clinic Assessment**

Your physician has referred your child to the Children's Health Clinic for assessment.

Attached you will find a consent form that must be signed by yourself and given to your child's school for completion. The school must fax the completed form to our office at which time we will contact the child's teacher/s to provide us with further information. Note that we cannot proceed with the referral until we have received this.

Once we have received the consent form from the school you will receive an email that provides a link to a questionnaire that you must complete. If you have difficulty completing online questionnaires please contact our office.

If your child is less than 5 years of age, we will require a questionnaire be completed by the daycare, preschool or playschool. If your child is homeschooled or does not attend daycare, preschool or playschool please advise us.

**If we do not receive the questionnaire(s) back within 60 days of this email, we will assume that your child no longer requires the assessment. We will then cancel the referral and notify the referring physician.**

Once questionnaire(s) have been completed we will notify you of your appointment date by email. Please note that our waiting time can extend to 3 **months** from the time we receive the completed questionnaire(s).

Please call the clinic if you have any questions.

Sincerely,

Children's Health Clinic