

NEUROTHÉRAPIE MONTRÉAL

Please fax the referral form to :514 933-6318

Referring physician	Client
Dr :	Name: _____
Fax :	Tél home: _____ Tél work: _____
Tél :	Birth date AAAA/MM/JJ: _____
Copy to Dr :	RAMQ : _____ Expi : _____

MEDECINE

- Consult in family medicine
- Consult in integrative medicine
- Consult in cardiology
- Consult in Neurology
- Consult in Psychiatry
- Consult in Sleep medicine

READAPTATION

- Physiotherapy
- Occupational therapy
- Massage therapy
- Osteopathy
- Speech therapy
- Chiropractic
- Nutrition

PSYCHOLOGIE

- Neuropsychological Evaluation
- Alzheimer Evaluation & treatment
- Psychological Evaluation
- Consult in Psychology
- Evaluation for ADD/ADHD

MÉDICAL TECHNICAL PLATFORMS

- Cardiopulmonary polygraphy of sleep at home
- Polysomnography (PSG-EEG) in the lab
- Home titration of PPC
- Manuel titration in lab with PSG-EEG
- CPAP\BIPAP suivi et traitement
- Electroencéphalogram (EEG)
- Électrocardiogram (ECG)
- Ambulatory cardiac monitoring 1 to14 days
- Exercise electrto cardiogram (ECG -Treadmill)

These services are not covered by your public health insurance. Private insurance can cover some costs according to your plans.

***Prices may be changed at any time without further notice.**