

Medical Equipment Loan Service

Enter depot info here

Referral For Equipment

Equipment is the property of The Canadian Red Cross and is provided as a service to the community. The loaning of equipment is for a limited term and is subject to availability. **Please call ahead to ensure the equipment is available.**

Patient's Name: _____ Phone: (____) _____

Optional, the following information will ensure the correct piece of equipment is loaned. Height: _____ (cm/in), Weight _____ (kg/lbs)

This patient has a medical condition that requires the use of the following equipment:

	Size	Features Required
<input type="checkbox"/> Wheelchair	_____	_____
<input type="checkbox"/> Cane	_____	_____
<input type="checkbox"/> Crutches	_____	_____
<input type="checkbox"/> Walker	_____	_____ with wheels?
<input type="checkbox"/> Raised Toilet Seat	_____	_____
Other Items		
<input type="checkbox"/> _____	_____	_____
<input type="checkbox"/> _____	_____	_____
<input type="checkbox"/> _____	_____	_____
<input type="checkbox"/> _____	_____	_____

Comments/Diagnosis: _____

 Signature of Medical Professional Print Name

Circle One: Doctor/R.N./P.T./O.T. Phone Number: () _____

Donations Are Welcome