

105 – 5 Quarry Ridge Rd.
Barrie, ON, L4M 7G1
Phone: 705 503-6333
Fax: 705 503-6330
E-Mail: derm@simcoderm.com
Web: www.simcoderm.com

Psoriasis Study Referral Form:

Reason for Referral: Psoriasis

Body Surface Area > 10%

Moderate Severe Very severe

Previous medications: