



Lactation Counselor & Maternal Child Health Referral Form

Regional County Public Health Departments offer in-home lactation support and counseling, and Maternal and Child Health education to all county residents during normal business hours.

Please complete the referral form.

Fax the referral to the county in which the mother/parent resides.

Local Health Department Fax Numbers

- Ontario County**
Phone 585-396-4343
Fax 585-396-4551

- Seneca County**
Phone 315-539-1920
Fax 315-539-9493

- Wayne County**
Phone 315-946-5749
Fax 315-946-7114

- Yates County**
Phone 315-536-5160
Fax 315-536-5146

Date of Referral _____

Mother's/Parent Name _____ DOB _____

Street Address: _____

Town _____ Zip Code _____

Phone # _____ Alternate Phone # _____

Physician: _____

Physician Phone # _____

Services Requested (Check all that apply):

- Pre-Natal Education & Support
- Post-Partum Education & Support
- Lactation Counseling & Support by Certified Lactation Counselors
- Newborn Education & Support

Pertinent Information: _____

Referred by _____ Phone # _____

Facility _____

- ❖ Please note these are education visits only, no medical assessments or weights will be completed with visits.