

1295 Riverbend Road, London, Ontario N6K 0G2 1240 Commissioners Rd W, London, Ontario N6K 1C7 Phone: 519 432-1919 ext. 615

cardiology@medpoint.ca

| Fax Referrals to: 519-473-2666   |   |
|--|---|
| Today's Date:  | Referring Physician Name:   |
| Patient's Name:  | Referring Physician Billing #:  |
| Health Card #: D.O.B.:   |   |
| Address:   | Clinic Address:   |
| City: Postal Code:   |   |
| Home Phone: Cell Phone:  |   |
| riome i none.  | Fax #:  |
| Clinical Information   |   |
|  |   |
| Cardiology Services/Indications (one or more indications must be                 | be selected for testing to be booked)                                 |
|  |   |
| □ CONSULTATION   | ☐ STRESS TEST ONLY ☐ Exercise clearance                               |
| ☐ First Available Appointment (Cardiology <u>OR</u> Internal Medicine)           | ☐ Arrhythmias   |
| ☐ Dr. Huq – Cardiology   | ☐ Multiple risk factors   |
| West5 − 1295 Riverbend Rd, London ON  □ Dr. Kerr − <b>Internal Medicine</b>      | ☐ Evaluation of suspected or know CAD                                 |
| Byron – 1240 Commissioners Rd W, London ON                                       | ☐ Discharge post-cardiac ischemic event                               |
| Byron – 1240 Commissioners Ru W, London ON                                       | ☐ Assessment of patient with valvular or structural heart disease     |
| ☐ ECHOCARDIOGRAM ONLY  | Assessment of patient with varvular of structural heart disease       |
| (2D Echo and Colour Doppler)   | ☐ STRESS ECHOCARDIOGRAM ONLY  |
| ☐ Heart Murmurs  | (2D Echo and Colour Doppler)  |
| ☐ Native Valvular Stenosis   | ☐ Screening for CAD- moderate or high risk                            |
| ☐ Native Vavular Regurgitation   | ☐ Screening for CAD- Chest Pain with multiple coronary risks          |
| ☐ Known or Suspected Mitral Valve Prolapse                                       | ☐ Follow up Post-Intervention with coronary artery disease            |
| ☐ Congenital or Inherited Cardiac Structural Disease                             | ☐ Follow up on Medical therapy with coronary artery disease           |
| ☐ Prosthetic Heart Valves  | ☐ Exertional dyspnea  |
| ☐ Infective Endocarditis   | □ Valvular stenosis   |
| ☐ Pericardial Disease  | ☐ Valvular Regurgitation  |
| ☐ Cardiac Masses   | ☐ Provocable left ventricular outflow tract obstruction               |
| ☐ Interventional Procedures – pre or post  |   |
| ☐ Pulmonary Diseases   | ☐ HOLTER MONITORING ONLY  |
| ☐ Chest Pain and Coronary Artery Diseases  | ☐ Abnormal ECG  |
| ☐ Dyspnea, Edema and Cardiomyopathy  | ☐ Palpitations- unknown etiology                                      |
| ☐ Hypertension- suspected LV dysfunction or LVH                                  | □ Syncope   |
| ☐ Thoracic Aortic Disease  | □ Post CVA/TIA  |
| ☐ Neurologic or Other Possible Embolic Events                                    | ☐ Dyspnea/Chest Pain  |
| ☐ Arrhythmias Syncope and Palpitations   | ☐ Weakness/Fatigue  |
| ☐ Before Cardioversion   | □ Rule out Afib/Flutter   |
| ☐ Suspected Structural Heart Disease   | ☐ Known A-fib   |
|  | ☐ Atrial Arrhythmias  |
| ☐ 12 LEAD ECG ONLY   | □ Ventricular Arrhythmias   |
| ☐ 24 HOUR AMBULATORY BLOOD PRESSURE MONITOR ONLY (\$80 fee, not covered by OHIP) | <ul><li>☐ Medication effect and Control</li><li>☐ Pacemaker</li></ul> |