



Pioneer Cardio Diagnostics

Care from the heart

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7368 Yonge St. #207
Thornhill
ON, L4J 8H9

CARDIOLOGY CONSULTATION & DIAGNOSTIC
REQUISITION FORM

www.pcardiology.com

Appointment Date & Time: _____

Consult Urgency:

Patient needs to be seen in less than 48 hours

PATIENT'S NAME (LAST NAME / FIRST NAME)		
PATIENT'S ADDRESS		
HEALTH CARD NUMBER	VERSION CODE	GENDER: MALE FEMALE
DATE OF BIRTH	DAYTIME PHONE	EVENING PHONE

CARDIAC DIAGNOSTIC SERVICES	REASON FOR REFERRAL	
<input type="checkbox"/> CARDIOLOGY CONSULTATION <input type="checkbox"/> CARDIOLOGY CONSULTATION - IF THE TEST RESULT IS ABNORMAL (Same day if high risk) <input type="checkbox"/> ECHOCARDIOGRAPHY AND DOPPLER STUDY <input type="checkbox"/> EXERCISE STRESS (GXT) * <input type="checkbox"/> STRESS ECHOCARDIOGRAPHY * <input type="checkbox"/> HOLTER MONITORING: <input type="checkbox"/> 24 HOURS <input type="checkbox"/> 48 HOURS <input type="checkbox"/> 72 HOURS <input type="checkbox"/> LOOP EVENT/HOLTER RECORDER (2 WEEKS) <input type="checkbox"/> ECG <input type="checkbox"/> HYPERTENSION CONSULT WITH 24 HOURS AMBULATORY BLOOD PRESSURE MONITORING (FREE) <input type="checkbox"/> 24 HOURS AMBULATORY BLOOD PRESSURE MONITORING \$50 (Not covered by OHIP) <p>* Please note that echo is advised prior to stress test to rule out possible contraindications.</p>	<input type="checkbox"/> CHEST PAIN <input type="checkbox"/> SHORTNESS OF BREATH <input type="checkbox"/> HEART MURMUR <input type="checkbox"/> DIZZINESS <input type="checkbox"/> Annual exercise test in patients with history of CVA, TIA or peripheral atherosclerosis** <input type="checkbox"/> Coronary artery disease risk factors (DM, HTN, hyperlipidemia, smoking, family history of CAD) <input type="checkbox"/> Annual exercise test in patients with known Coronary artery disease (MI, CABG, PCI, ACS or abnormal stress imaging)** <p>** Per CCN (Canadian Cardiac Care Network) Recommendation. Note: Please forward previous ECG, Echo, CXR, blood work if available.</p>	<input type="checkbox"/> PRESYNCOPE/SYNCOPE <input type="checkbox"/> PALPITATIONS <input type="checkbox"/> PRE-OP CARDIAC EVALUATION <input type="checkbox"/> PERIPHERAL EDEMA <input type="checkbox"/> R/O MITRAL VALVE PROLAPSE <input type="checkbox"/> ARRHYTHMIA SCREENING <input type="checkbox"/> CARDIOMYOPATHY <input type="checkbox"/> PERICARDIAL DISEASES <input type="checkbox"/> RISK OF ENDOCARDITIS <input type="checkbox"/> VALVULAR HEART DISEASE <input type="checkbox"/> OTHER <p>Please note when indications for a consult are related to and/or need rhythm assessment, a 48 hours Holter monitoring may be done prior to the consult.</p>

OTHER TESTS TO ARRANGE*	
<input type="checkbox"/> EXERCISE/PERSANTINE CARDIOLITE/MIBI <input type="checkbox"/> TRANSESOPHAGEAL ECHOCARDIOGRAM (TEE) <input type="checkbox"/> CORONARY ANGIOGRAPHY (CATH) <p>*Please note that cardiology consult will be done before providing these tests.</p>	<p>For an angiogram, please fax if available:</p> <ul style="list-style-type: none"> Recent blood work (<3 months) ECG, Echo, CXR and other relevant documents.

CLINICAL INFORMATION:	
REFERRING PHYSICIAN:	DATE:
PHYSICIAN'S SIGNATURE:	BILLING NO:



**7368 Yonge St.
Suite #207**

**Thornhill ON
L4J 8L9**

Free Parking Available



Our physicians:

- Dr. Andrew Crean MRCP, FRCR, MPhil
- Dr. Arman Homat MD, MACP, DABIM
- Dr. Steven Sra MD, FRCPC

Bring with you

1. Your valid health card (required by the Ministry of Health).
2. All your medication.
3. This referral form.

Medication

- Check with doctor to determine if you should hold medication prior to your test.

Missed Appointment Charges

- \$100 charge to rebook any missed appointment.
- No charge if cancelled 24 hours prior to the test.

Information about studies and average duration of each study:

ECG:

Measures the electrical activity of the heart, providing information about heart damage and rhythm problems. 10-15 minutes.

Echo Doppler:

Sound waves are used to study heart valves; the muscle and blood flow of the heart. 45 to 60 minutes.

Exercise Test (GXT) and Stress Echo:

Walk on treadmill while monitored. Wear comfortable shoes and clothing. No coffee or tea on the day of test. Have a light meal on the day of the test. If you are taking Beta Blockers, please consult with your doctor to stop the medication before the test. 45-60 minutes.

Holter Monitor:

Monitor heart rhythm for 48 hours during normal daily activities. 10-15 minutes.

Continuous Loop/Holter Recorder:

Monitor worn for 1 or 2 weeks to record heart rhythm. 10-15 minutes.

Ambulatory Blood Pressure Monitor:

Monitor blood pressure for 24 hours during normal daily activities. 10-15 minutes. This study is not covered by OHIP.