



REFERRAL AND/OR REQUEST FOR CARDIAC DIAGNOSTICS

1300 R HEART , 1300 743 278

APPOINTMENT TIME: _____

DATE: _____

PATIENT DETAILS

Name: _____ DOB: _____

Phone: _____

Address: _____

Med.No.: _____

REFERRING DOCTOR'S DETAILS:

Signature: _____ Date: _____

COPIES TO:

TEST/S REQUIRED:

- | | |
|--|---------------------------------------|
| ☐ 12 Lead ECG | ☐ Child (0-14) |
| ☐ Ambulatory Blood Pressure Monitor | |
| ☐ 24hr Holter (ECG) Monitor | |
| ☐ Multi-Day MyPatch Holter Monitor | ☐ Child (0-14) |
| ☐ Echocardiogram | ☐ Child (0-14) |
| ☐ Echocardiogram (Bubble Study) | |
| ☐ Exercise Stress ECG | |
| ☐ Exercise Stress ECHO | |
| ☐ Pacemaker Check | |

CLINICAL NOTES:

NEW PATIENTS:

Fill out a "New Patient Form" online:

www.rotarhearthealth.com.au

Or please arrive 10 minutes earlier to fill out a printed copy at our clinic.

SEE OVERLEAF:

Important information for Doctors and Patients | Our contact details | Location | Working hours | Map

IMPORTANT INFORMATION

FOR DOCTORS:

Please indicate medications relevant to your patient:

STOP 2 FULL DAYS BEFORE DAY OF TEST

- ☐ Alprenolol (Aptin)
- ☐ Atenolol (Tenormin, Noten)
- ☐ Bisoprolol (Bicor)
- ☐ Metoprolol (Betaloc, Lopressor, Minax)
- ☐ Oxprenolol (Corbeton, Trasicor)
- ☐ Prindolol (Barbloc, Visken)
- ☐ Propranolol (Deralin, Inderal, Cardinol)
- ☐ Timolol (Blocadren)

STOP 1 FULL DAY BEFORE DAY OF TEST

- ☐ Diltiazem (Cardizem, Cardizem CD)
- ☐ Verapamil (Isolptin, Veradil, Anpec, Cordilox, Veracaps SR)
- ☐ Nitrates (Transiderm, Nitrobid patches, Nitrodur, Imdur, Isordil)

CONTACT DETAILS:

ROTAR HEART HEALTH PTY LTD

ABN: 15 689 174 623

EMAIL:

info@rotarhearthealth.com.au

www.rotarhearthealth.com.au

WORKING HOURS:

MONDAY - FRIDAY

9am - 6pm

PLEASE BRING YOUR MEDICARE CARD

FOR PATIENTS:

24 Hr Holter Monitor and Ambulatory Blood Pressure Monitor

- Wear a loose-fitting top.
- Allow at least 15 minutes for monitor fitting.
- Monitors must be returned to the clinic as per agreed date and time.
- No shower while wearing the monitor.

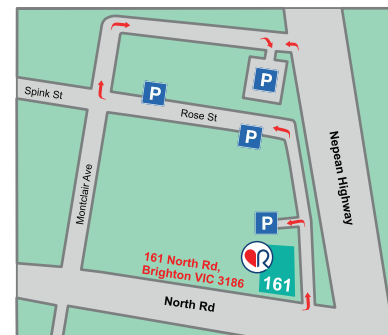
Stress ECG/Stress Echo

- Wear comfortable walking shoes.
- Do not eat or drink 2 hours prior to the test.
- Allow at least 30 minutes for the test.
- Please check with your doctor if you need to stop any relevant medications prior to the test.

ADDRESS:

**Ground Floor
161 North Rd
Brighton
VIC 3186**

*Free parking is available at the rear of the building as well as on Rose Street.



TEL: 1300 R HEART | 1300 743 278 | FAX: +61 3 8611 7911