



# CARDIOLOGY REQUISITION

PATIENT LINE 905.849.6799  
 BOOKING LINE 905.849.9367  
 FAX 905.849.8266  
[www.OakvilleCardiologists.com](http://www.OakvilleCardiologists.com)

PATIENT NAME \_\_\_\_\_  
 BIRTHDATE dd mm yy □ M □ F \_\_\_\_\_  
 HEALTH CARD \_\_\_\_\_  
 TEL H \_\_\_\_\_  
 W \_\_\_\_\_  
 ADDRESS \_\_\_\_\_  
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REFERRING MD \_\_\_\_\_  
 ADDRESS \_\_\_\_\_  
 \_\_\_\_\_  
 TEL \_\_\_\_\_  
 FAX \_\_\_\_\_  
 REFERRAL # \_\_\_\_\_  
 COPY TO \_\_\_\_\_

CARDIAC DIAGNOSTICS	Date/Time	Location
<input type="checkbox"/> 1. Echocardiogram		
<input type="checkbox"/> 2. Exercise Cardiolute <input type="checkbox"/> 3. Persantine Cardiolute <input type="checkbox"/> 4. Exercise Stress Echocardiogram <input type="checkbox"/> 5. Dobutamine Stress Echocardiogram <input type="checkbox"/> 6. Exercise Stress Test		
<input type="checkbox"/> 7. Holter Monitor 24 hrs <input type="checkbox"/> 8. Holter Monitor 48 hrs <input type="checkbox"/> 9. Holter Monitor 72 hrs <input type="checkbox"/> 10. Arrhythmia Monitor (Holter 14 days)		
<input type="checkbox"/> 11. ECG		
<input type="checkbox"/> 12. Ambulatory Blood Pressure Monitor 24 hrs (fee \$50)		
<input type="checkbox"/> 13. Resting MUGA		OTMH

## CLINICAL INDICATION

If urgent, state reason

MD signature

Date

## CONSULTATION

New patient, requesting first available cardiologist

New patient, requesting specific cardiologist

Returning patient, previously seen by



- Dr Vera Chiamvimonvat
- Dr Michael Heffernan
- Dr Sean Jedrzekiewicz
- Dr Qin Li
- Dr Russell Mao
- Dr David McConachie
- Dr Jan Orfi
- Dr Michelle Paikin

Please inform patients regarding medications to be held prior to tests.

Please see reverse for test information, patient preparation and map. Electronic forms and further information available at [www.OakvilleCardiologists.com](http://www.OakvilleCardiologists.com).

Clinical questions for patients who have had testing at Oakville Cardiologists or Oakville Hospital can be addressed via e-consult.

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Date/Time	Location
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**DORVAL SITE**  
 690 Dorval Drive  
 Suite 300  
 Oakville ON L6K 3W7

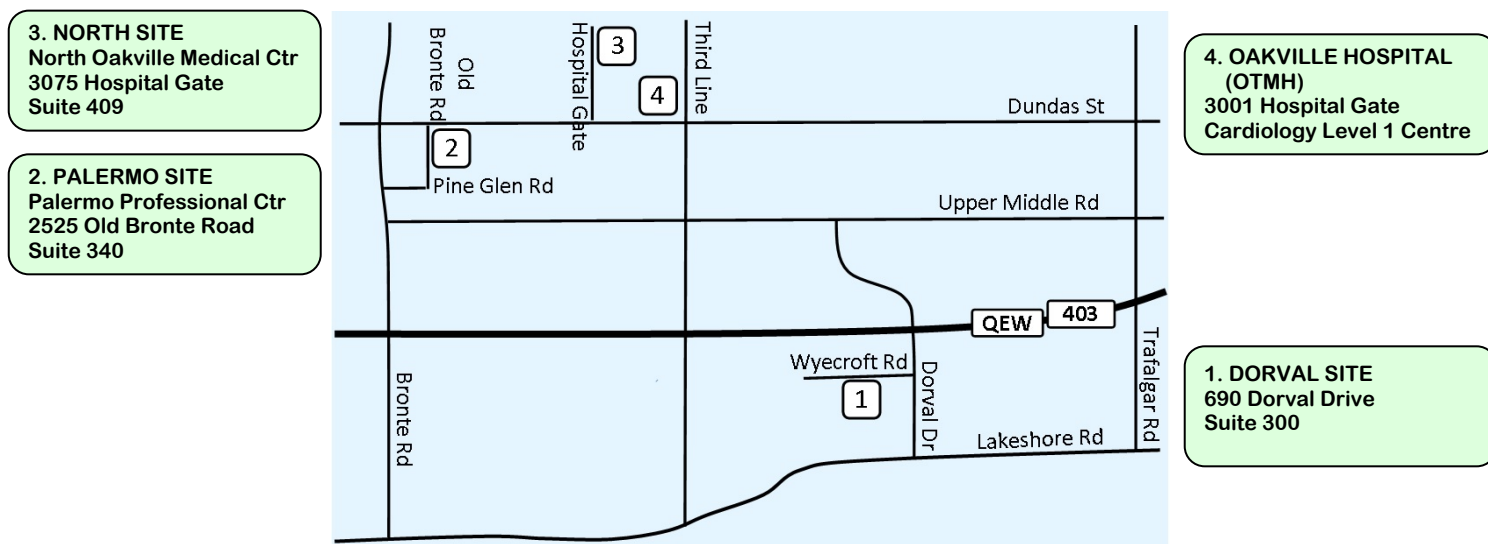
**PALERMO SITE**  
 Palermo Professional Centre  
 2525 Old Bronte Road, Suite 340  
 Oakville ON L6M 4J2

**NORTH SITE**  
 North Oakville Medical Centre  
 3075 Hospital Gate, Suite 409  
 Oakville ON L6M 1M1

**OAKVILLE HOSPITAL (OTMH)**  
 3001 Hospital Gate,  
 Cardiology Dept, Level 1 Centre  
 Oakville ON L6M 0L8

TEST	Test Information	Patient Preparation
1. Echocardiogram	45 minutes	<ul style="list-style-type: none"> <li>None</li> </ul>
2. Exercise Cardiolute 3. Persantine Cardiolute	4 - 5 hours Test performed at Oakville Hospital  Some patients may require 2-day protocol of 2 hours each day.	<ul style="list-style-type: none"> <li>Bring current medications</li> <li>No caffeine (eg any tea, coffee, chocolate, caffeinated soft drinks, drugs containing caffeine, any decaffeinated drinks) for 24 hours prior to test</li> <li>Fasting 4 hrs before test. No fatty food the day of the test</li> <li>Wear running shoes or rubber soled walking shoes, comfortable 2-piece exercise clothes</li> <li>Please bring fruits, vegetables and/or juice to have halfway through the test</li> <li>If you are diabetic and take insulin, please discuss with the nurse in Cardiology at Oakville Hospital what and when you should eat (905.338.4686)</li> </ul>
4. Exercise Stress Echocardiogram 5. Dobutamine Stress Echocardiogram	1.5 hours  Dobutamine stress echo performed at Oakville Hospital	<ul style="list-style-type: none"> <li>Bring current medications</li> <li>Fasting 2 hrs before test</li> <li>Wear running shoes or rubber soled walking shoes, comfortable 2-piece exercise clothes</li> </ul>
6. Exercise Stress Test	30 minutes	
7. Holter Monitor 24 hrs 8. Holter Monitor 48 hrs 9. Holter Monitor 72 hrs  10. Arrhythmia Monitor (Holter Monitor 14 days)	15 minutes each visit	<ul style="list-style-type: none"> <li>Bring current medications</li> <li>No body lotion</li> <li>Wear loose 2-piece clothing</li> <li>Please note that equipment needs to be returned at end of monitoring period</li> <li>Please note that for arrhythmia monitor, patient needs to return after 7 days for repeat monitor attachment, and may also need to return at 3 to 4 days interval for reassessment</li> </ul>
11. ECG	10 minutes	<ul style="list-style-type: none"> <li>No body lotion</li> </ul>
12. Ambulatory Blood Pressure Monitor (24 hrs)	15 minutes	<ul style="list-style-type: none"> <li>Bring current medications</li> <li>Wear loose 2-piece clothing</li> <li>Please note that equipment needs to be returned at end of 24 hours</li> </ul>
13. Resting MUGA	1 hour Test performed at Oakville Hospital	<ul style="list-style-type: none"> <li>None</li> </ul>

For further test information, please refer to [www.OakvilleCardiologists.com](http://www.OakvilleCardiologists.com)



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