

PATIENT INFORMATION

Name: ☐ M ☐ F

Healthcard #: Version Code:

Primary Phone #: DOB:

Secondary Phone #:

REFERRING PHYSICIAN INFORMATION

MD Name/Signature:

MD Billing number: Date:

Phone #:

Fax #:

URGENCY

☐ ROUTINE ☐ SEMI-URGENT ☐ URGENT

TESTING

ECHOCARDIOGRAPHY

Stress Echo

☐ With Consult

☐ Test Only

☐ 2D Echocardiogram

CARDIOLOGY / OTHER

Holter: ☐ 24-72 hr ☐ 7-14 day

☐ 24 hr ABPM (\$35 not covered by OHIP)

☐ EKG/Electrocardiography

☐ If diagnostic test is abnormal, please automatically arrange for Cardiology Consultation.

INDICATIONS

☐ Chest Pain

☐ Dyspnea/Edema

☐ Palpitations/Arrhythmia

☐ CHF

☐ Murmur/Valvular Regurgitation

☐ Screening/DM/HTN/HPL

☐ Other: _____

CARDIOLOGY CONSULTATIONS

☐ Dr. Dakshina Murthy (Virtual)

☐ Dr. Rachel Wamboldt (Virtual)

☐ Next Available

INTERNAL MEDICINE CONSULTATIONS

☐ Dr. Glen Providence (On Site)

Please fax this form to 519-915-6326



Your reliable partner in every patient's heart health journey!

Your doctor has referred you to Capture Health
You will receive a call with your appointment date and time.

Date _____ Time _____

Reminder: Please bring a complete list of medications with you at time of testing.

DIAGNOSTIC TEST PREPARATION

ADDRESS

Corunna

208 Hill Street, Unit #9

Corunna, ON N0N 1G0

Major crossroads: Hill Street/Lyndoch

Phone: 519-977-6643

Fax: 519-915-6326

☐ ECHOCARDIOGRAM (ECHO)

Time: approximately 45 - 60 minutes.

PREP:

- Do not rub any creams or lotion on your chest prior to appointment.

☐ EXERCISE STRESS ECHO

Time: approximately 1 - 2 hours.

PREP:

- Light meal 3 hours prior to exercise stress test.
- Wear light comfortable clothing and running shoes.
- No caffeine 4 hours prior.

☐ HOLTER MONITOR/ELECTROCARDIOGRAM (EKG)

Time: approximately 15 minutes

PREP:

- Do not rub any creams or lotion on your chest prior to appointment.

☐ BLOOD PRESSURE MONITOR

Time: approximately 15 minutes.

PREP:

- You will not be able to shower while wearing this monitor.
- Wear comfortable clothing.
- Fee: \$35 charge
(Some insurance companies will reimburse a portion, or all of the charge, as it is not covered by OHIP.)

☐ CARDIAC CONSULT

Time: approximately 15-30 minutes