



Cardiology Clinic Requisition
Bookings: 416-242-1000 Ext. 47141
Fax: 416-242-1067

Humber River Hospital
1235 Wilson Avenue
Toronto ON M3M 0B2

Alternate Phone #: _____

[] Patient gave Informed Consent

Referring Physician: _____

Copies to: _____

REQUEST FOR CARDIOLOGY CONSULT []

Clinical Indications: _____

ECHO (ECHOCARDIOGRAM) Newborn to Adult (see reverse side for instructions)

- [] Transthoracic Echocardiogram (TTE) [] Transesophageal Echocardiogram (TEE)
[] Contrast Enhanced Echocardiography (Definity) [] Saline Contrast Echocardiography (Bubble study)
[] Stress-Echocardiogram [] Paediatrics

Appointment date: _____ at _____ am [] pm []
Month Day Year

CARDIAC STRESS TEST (see reverse side for instructions)

- [] Stress Test [] Nuclear Stress - Exercise [] Nuclear Stress - Pharmacologic
[] MUGA Scan

Appointment date: _____ at _____ am [] pm []
Month Day Year

AMBULATORY MONITORING (see reverse side for instructions)

- [] ECG (No appointment necessary) [] 24hr Holter Monitor [] 48hr Holter Monitor
[] Ambulatory Blood Pressure Monitor (note: \$70.00 fee)
[] Pacemaker/ICD Assessment: [] Single Chamber [] Dual Chamber

Appointment date: _____ at _____ am [] pm []
Month Day Year

CLINICAL INDICATION *must indicate*

Note: Requisition must be signed by ordering physician in order to have appointment booked

Form # 000105, REV 2016_03

Physician's Signature

PLEASE SEE BACK OF THIS REQUISITION FOR DIRECTIONS AND PREPARATION INSTRUCTIONS

Patient Instructions

1. Traffic and parking can be a challenge. We ask that you arrive 30 minutes before your appointment time to ensure you are not late for your test.
2. If you have a new cough, fever, chills or flu-like symptoms, please call to reschedule your appointment.
3. If language may be a barrier for you, please let us know and we can contact an over-the-phone interpreter for you during your test. You will need to follow very detailed and specific instructions.

Echocardiography (Echo)

** This test is an ultrasound of your heart. It will take one (1) hour.

1. Please wear a 2-piece outfit that buttons in the front.
2. Please bring a list of all the medicines you are currently taking.
3. Please bring your health card and a photo ID.
4. If this test is a **paediatric echo**, please feed your infant before the test. Bring an extra bottle to the appointment.

Transesophageal Echocardiogram (TEE)

1. Please bring all the medicines (or a list of all the medicines) you are currently taking.
2. Please bring your health card and photo ID.
3. *Before the test:*
 - Do not eat or drink for at least 6 hours before the test.
 - Unless your doctor tells you otherwise, take your prescribed medicines on your regular schedule, with a small amount of water.
 - Arrange for someone to drive you home after your test. You will not be able to drive home.
 - If you wear dentures, please take them out before your test.
4. *After the test:*
 - You will be drowsy from the sedatives. Do not drive for 24 hours after the test.
 - Do not eat or drink (especially hot foods or drinks) for at least 2 hours after the test.
 - You may experience a sore throat.
 - Call your doctor if you have bleeding, persistent pain or fever. These symptoms are not normal.

Cardiac Stress Test: Stress Test

You will exercise on a treadmill, while the doctor and technologist watch you. We will monitor your heart, blood pressure and oxygen levels. If you have any discomfort during the test, let the staff know.

1. Do not drink alcohol or caffeine on the day of the test.
2. Do not eat 2 hours before your test. If you have diabetes, please speak with your doctor about eating restrictions before your test.
3. Wear comfortable shoes, with rubber soles (such as running shoes) and loose fitting clothes.
4. Please speak with your doctor about specific medicines you may need to stop before your test.

Cardiac Stress Test: Nuclear Stress - Exercise

1. Do not drink alcohol or caffeine on the day of the test.
2. You may eat a light breakfast.
3. Wear comfortable shoes, with rubber soles (such as running shoes) and loose fitting clothes.
4. Please speak with your doctor about specific medicines you may need to stop before your test.

Cardiac Stress Test: Nuclear Stress - Pharmacologic

1. Do not drink alcohol or caffeine on the day of the test.
2. You may eat a light breakfast.
3. You will not have to walk during this test.

Ambulatory Monitoring: Holter or Ambulatory Blood Pressure Monitor

1. You will be attached to a Holter monitor for 24 to 48 hours.
2. **Do not take a shower, bathe or swim while you are wearing your monitor.**
3. If we give you an ambulatory blood pressure monitor, you must pay \$70.00 before the test.
4. We will attach a portable blood pressure monitor for 24 hours.
5. The monitor will take your blood pressure automatically at regular intervals.
6. Please return to the clinic at the time your technologist tells you so that we can remove the monitor.

Ambulatory Monitoring: Pacemaker/ICD Assessment

** You do not need to prepare for this test.

1. Wear a 2-piece outfit.
2. **Bring your pacemaker I.D. card with you.**

Ambulatory Monitoring: Electrocardiogram (ECG)

** You do not need to prepare for this test.

1. You can come to the clinic from 8:30 a.m. to 4:30 p.m. You do not need an appointment.

**TO BOOK OR CANCEL AN APPOINTMENT, OR IF YOU HAVE ANY QUESTIONS,
PLEASE CALL (416) 242-1000 ext. 47141**