



COASTAL HEART AND VASCULAR

COMPLETE CARDIOVASCULAR CARE

Cardiovascular Physicians and Interventionalists

P 1300 9 12345

Outpatient Referrals **F** (07) 5532 9890

Inpatient Referrals F (07) 5676 9639

E reception@coastalhearts.com.au

Dr Ross Sharpe Prof Rohan Jayasinghe Dr Shashi Ranjan _____

NAME _____ DATE OF BIRTH ____ / ____ / ____

TELEPHONE _____ MOBILE _____ MEDICARE NUMBER _____

APPOINTMENT PRIORITY

- Urgent < 2 Days
- Routine (next available)
- Semi Urgent < 1 Week
- Hospital Admission (contact rooms to advise)

CARDIAC & VASCULAR CONSULTATION

- Chest Pain / Exertional Symptoms
- Dyspnoea
- Abnormal Cardiac / Vascular Test
- Hypertension
- Migraine for Investigation (PFO)
- Intermittent Claudication / Foot Rest Pain
- Carotid Stenosis - Symptomatic Asymptomatic
- Other: _____
- TIA / CVA for Investigation

CARDIAC INVESTIGATIONS

- 12 Lead ECG
- Echocardiogram
- Exercise Stress Test [^]
- Stress Echocardiogram [^]
- Transcranial Doppler (PFO Screening)
- Transoesophageal Echocardiogram ^{**}
- Coronary Angiography (+/- Stenting) ^{**}

VASCULAR DUPLEX SCANS AND TESTS

- Lower Limb - Left Right Arterial Venous
- Upper Limb - Left Right Arterial Venous
- Carotid Duplex +/- Transcranial Duplex (for investigation of Cerebrovascular Disease)
- Renal Duplex
- Mesenteric Duplex
- Aorto-iliac Duplex
- Digital Subtraction Angiography (+/- Stenting) ^{**}

CLINICAL DETAILS _____

REFERRING DOCTOR _____ PROVIDER NO. _____

ADDRESS _____ DATE _____

CC _____ SIGNATURE _____

Locations

- Gold Coast Private Hospital
Suite 9, Ground Floor
14 Hill Southport QLD 4215
- Southport
2 Drury Avenue,
Southport, QLD 4215
- Hope Island Specialist Suite
Suite 5, Level 1, No 8,
Santa Barbara Road,
Hope Island, QLD 4212
- Ballina Health Centre
32 Tamar Street
Ballina NSW 2478

* Denotes Consultation Required # Denotes Hospital Admission Required ^ Denotes Consultation If Abnormal

- Cardiovascular Consultation • Chest Pain Assessment • Cardiac Risk Assessment • Pacemaker Implants • Valvuloplasty
- Angiography & Stenting - Coronary - Renal - Peripheral - Carotid • Below-the-knee Arterial Interventions • Stroke Intervention
- PFO/ASD Closures • TCDI Screening • Intravascular Ultrasound • Rotastenting • Coronary Flow Wire • Atrial Appendage Closure

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REFERRAL

TEST	DURATION	PREPARATION
Stress Test	1 Hour	Fast 2 hrs prior to test (water allowed). Wear comfortable clothing and footwear.
Stress Echocardiogram	1 Hour	Fast 2 hrs prior to test (water allowed). Wear comfortable clothing and footwear.
Echocardiogram	30-45 Minutes	No Preparation.
Renal, Mesenteric Aorto-iliac Scan	1 Hour	Fast 2 hrs prior to appointment. Do not have a heavy meal prior to fasting. Please drink water to keep well hydrated.
ECG	10-15 Minutes	Clean dry skin. No powder or creams.
Other Tests		No preparation.

CONSULTATION APPOINTMENTS

New Patients	Please post or fax your referral and patient information form prior to your appointment. Patient information form is available for download from the website www.coastalhearts.com.au or contact rooms. Please bring fully up to date medication list.
Review Patients	Please bring an up to date medication list.
All Patients	Please bring all relevant test results with you.

PAYMENT OF CONSULTATIONS - Coastal Heart and Vascular is not a bulk bill practice. Payment is required in full at the time of the consultation, via cash, eftpos or credit card. Government issued pensioner card holder will pay a reduced fee.

HOSPITAL ADMISSIONS - No Gap Policy for standard hospital admission and procedures.

DIRECT REFERRAL - Echocardiograms & Vascular duplex bulk billed.