

## **LOCATIONS:**

Windsor • Essex • LaSalle • Leamington Lakeshore • Kingsville

PATIENT INFORMATION		REFERRING PHYSICIAN INFORMATION				
Name:	M F	MD Name/Sign	ature:			
Healthcard #:	Version Code:	MD Billing numb	ber: Date:			
Primary Phone #:	DOB:	Phone #:				
Secondary Phone #:		Fax #:				
URGENCY						
ROUTINE SEMI-URGENT URGENT						
TESTING						
Stress Echo With Consult Test Only 2D Echocardiogram	MUCLEAR CARDIC  Myocardial Perfusion  Exercise  Persantine/I  MUGA  Pyrophosphate (  Viability  est is abnormal, please auto	n (MIBI) Dobutamine (Amyloid)	CARDIOLOGY / OTHER  Holter: 24-72 hr 7-14 day  24 hr ABPM (\$35 not covered by OHIP)  EKG/Electrocardiography  e for Cardiology Consultation.			
INDICATIONS						
Chest Pain CHF Other:	Dyspnea/Edemo		Palpitations/Arrhythmia Screening/DM/HTN/HPL			
PHYSICIAN ASSESSMENT AND CONSULTATION						
Dr. Dhssraj Singh Dr. Brian Hachey Dr. Roland Mikhail	Dr. Dakshina Mu Dr. Jeffrey Anch Dr. Jonathan To	an	Dr. Kareem Ballut No Preference			

Please fax this form to 519-915-6326 or use the referral form at windsorheart.org





# Institute

Your doctor has referred you to the Windsor Heart Institute. You will receive a call with your appointment date and time.

Date Time	Date	Time
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Reminder: Please bring a complete list of medications with you at time of testing/consult.

# **DIAGNOSTIC TEST PREPARATION**

For more detailed information about your exam please visit our website at windsorheart.org

## **LOCATIONS**

#### Windsor

2464 Howard Ave, Suite 201 Windsor, ON N8X 3V6

Major cross roads: Howard Ave / Ypres Ave

Phone: 519-977-6643 Fax: 519-915-6326

#### Essex

186 Talbot St South, Suite A

Essex, ON N8M 1B6

Major cross roads: Talbot St South / Fairview Ave

Phone: 519-977-6643 Fax: 519-915-6326

## LaSalle

LaSalle Community Healthcare Centre 2125 Front Rd

LaSalle, ON N9J 2C1

Major cross roads: Front Rd / International Ave

Phone: 519-977-6643 Fax: 519-915-6326

## Leamington

Central Erie Shores Walk-in Clinic

33 Princess St

Leamington, ON N8H 5C5

Major cross roads: Erie St South / Mill St East

Phone: 519-977-6643 Fax: 519-915-6326

#### Lakeshore

Lakeshore Med Arts

1303 County Rd 22, Suite 120B Belle River, ON N8R 1A0

Major cross roads: County Rd 22 / Rourke Line

Phone: 519-977-6643 Fax: 519-915-6326

#### Kingsville (COMING 2024)

200 Main St East Kingsville, ON N9Y 1A6

Major cross roads: Main St East / Wigle Ave

Phone: 519-977-6643 Fax: 519-915-6326

ECH	OCARDIC	JGRAM	(ECHO

**Time:** approximately 45 - 60 minutes. **PRFP:** 

 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
- No caffeine for 4 hours prior
- Wear light comfortable clothing and running shoes

## HOLTER MONITOR/ELECTROCARDIOGRAM (EKG)

Time: approximately 15 minutes

PREP:

Do not rub any creams or lotio

 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.)

#### MYOCARDIAL PERFUSION/DOBUTAMINE STRESS

#### PREP:

- No caffeine (coffee, tea, chocolate, cola, Tylenol 3) for 24 hours prior to the test.
- Fast for 2 hours prior to the test unless you are diabetic.
- Wear loose, comfortable clothing and running shoes if scheduled for exercise stress test.
- Bring a list of current medications.
- Instructions for holding medications prior to the test will be given at time of booking.

#### CARDIAC CONSULT

**Time:** approximately 15-30 minutes

 Wait times depend on number of Cardiologists in clinic and urgent patient assessments.