



# Cardiodiagnostics Services Requisition

CARDIODIAGNOSTICS DEPARTMENT  
Phone: 519-749-6938 Fax: 519-749-6871

### PATIENT INFORMATION:

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_  
DOB: (dd/mm/yyyy) \_\_\_\_\_  
Health Card Number: \_\_\_\_\_  
Address: \_\_\_\_\_  
Street \_\_\_\_\_  
City \_\_\_\_\_ Province \_\_\_\_\_  
Postal Code \_\_\_\_\_ Phone: \_\_\_\_\_  
Height: \_\_\_\_\_ Weight: \_\_\_\_\_

### REFERRING PHYSICIAN:

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Street \_\_\_\_\_  
City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Additional copies: \_\_\_\_\_  
Has the patient previously been seen by a Cardiologist:  
 No  Yes if yes Specify: Dr. \_\_\_\_\_

**TO BOOK A TEST CALL CENTRAL BOOKINGS: 519-749-6990 FAX NON URGENT REQUISITIONS TO: 519-749-6989**  
*For URGENT (days) requests please contact the Cardiodiagnostics Department directly at 519-749-6938*

Patient Location:  Home  Hospital: \_\_\_\_\_  
Test to be completed by:  First Available Cardiologist or  Specific MD: \_\_\_\_\_  
Urgency:  Days  Weeks  Elective  
Is this a pre-operative assessment?  No  Yes Date of Surgery (if known): \_\_\_\_\_  
Translator Required?  No  Yes If yes, Specify Language: \_\_\_\_\_

### ECHOCARDIOGRAPHY

### ELECTROCARDIOGRAPHY

Transthoracic Echocardiogram  Agitated Saline (Bubble Study)  Contrast  
 Transesophageal Echocardiogram  
 12 Lead ECG  
Holter Monitor:  24 hour  48 hour  
Loop Recorder:  14 day  28 Day

### STRESS TESTING

Stress Test only  Stress Test with Consult  Stress Test +/- Consult  
*Select appropriate test:*  
 Treadmill Stress Test (Patient has no physical, cognitive or other impediment to exercise)  
 Exercise Stress Echocardiogram (abnormal ECG, LVH, prior CABG, Digoxin use, Female\*)  
*\*Consider stress imaging in female patients, due to high false positive rate with treadmill alone*  
 Dobutamine Stress Echocardiogram  
 Ischemia (unable to exercise)  Viability  Low-flow Low-gradient aortic stenosis  
 Nuclear Myocardial Perfusion Scan  
 Exercise  Persantine  Viability (Thallium)  MUGA (Wall Motion/EF)

**INDICATION:** Check all that apply \*\* Requisitions without appropriate indication/clinical information will be returned\*\*  
 Prior MI  Cardiac Cath  CABG  Valve Replacement  Mechanical  Tissue Model: \_\_\_\_\_  
 Chest pain  Dyspnea  Palpitations  AFib  Syncope  Murmur: \_\_\_\_\_  
 LV dysfunction  Cardiomyopathy  Aortic Disease  Source of embolus  Pericardial Disease  Chemotherapy  
 LVH  RV dysfunction  Congenital  Pulmonary HTN  Valve Disease: \_\_\_\_\_  
 Cardiac screening for asymptomatic patients with multiple cardiovascular risk factors (select all that apply):  
 Smoker  Diabetic  Dyslipidemia  Hypertension  Stroke/TIA  PVD  Family History CAD  Abnormal ECG

### CLINICAL INFORMATION:

Physician's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Office Use Only  
Date Received: \_\_\_\_\_ Scheduled Appointment: \_\_\_\_\_ Patient Notified



## Suggested Chest Pain Assessment Algorithm (Excluding Acute Coronary Syndromes)

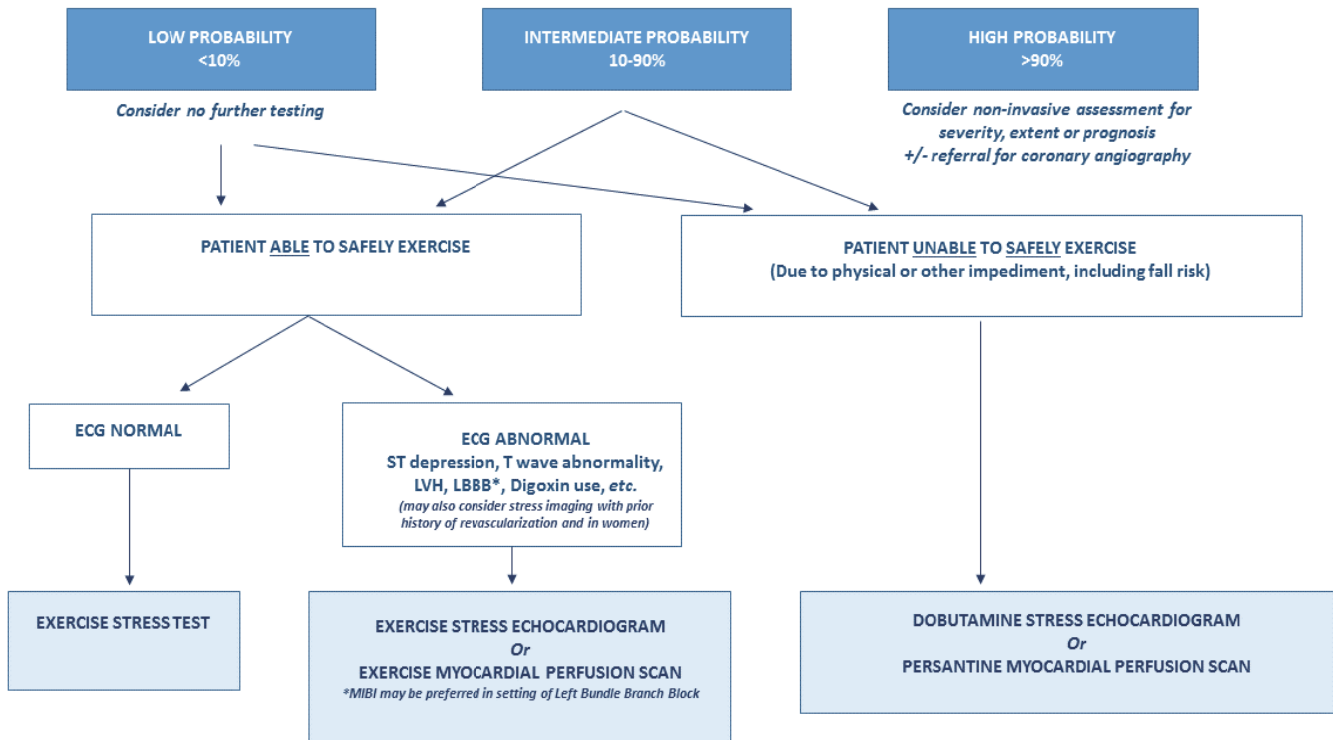
### STEP 1. Estimate Pretest Probability of Obstructive Coronary Disease as the cause for the patient's chest pain:

#### Chest Pain Characteristics:

1. Substernal chest discomfort, with characteristic quality and duration
2. Provoked by exertion or emotional stress
3. Relieved by rest and/or Nitroglycerine

Age	Non-Anginal Chest Pain ≤ 1 of 3		Atypical Chest Pain 2 of 3		Typical Anginal Chest Pain 3 of 3	
	Male	Female	Male	Female	Male	Female
30-39	4%	2%	34%	12%	76%	26%
40-49	13%	3%	51%	22%	87%	55%
50-59	20%	7%	65%	33%	93%	73%
60-69	27%	14%	72%	51%	94%	86%

### STEP 2. Determine the appropriate non-invasive risk stratification method:



*Adapted from ACC 2012 Guideline for the diagnosis and Management of Patients with Stable Ischemic Heart Disease. Circulation. 2012. 126:e354-e471.*

#### Stress Test with Consultation & +/- Consultation Services:

- Appropriate for the evaluation of patients presenting with chest pain or dyspnea with intermediate to high pre-test probability of obstructive CAD
- Cardiovascular screening for asymptomatic patients with multiple cardiovascular risk factors
- Pre-operative cardiac assessment, in patients with multiple cardiovascular risk factors or known CAD, not currently followed by a Cardiologist, **WHEN** it will change management
- +/- Consultation means a consultation will be provided in the event of a high risk study
- Stress test with Consultation service is **NOT** appropriate for patients who are currently being followed and managed by a Cardiologist. In this case, either refer directly to that physician's office or order a test only, with the results copied to the patient's usual Cardiologist