



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

Transthoracic Echocardiogram Agitated Saline (Bubble Study) Contrast
 Transesophageal Echocardiogram

ELECTROCARDIOGRAPHY

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 Rest only (for viability) 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)

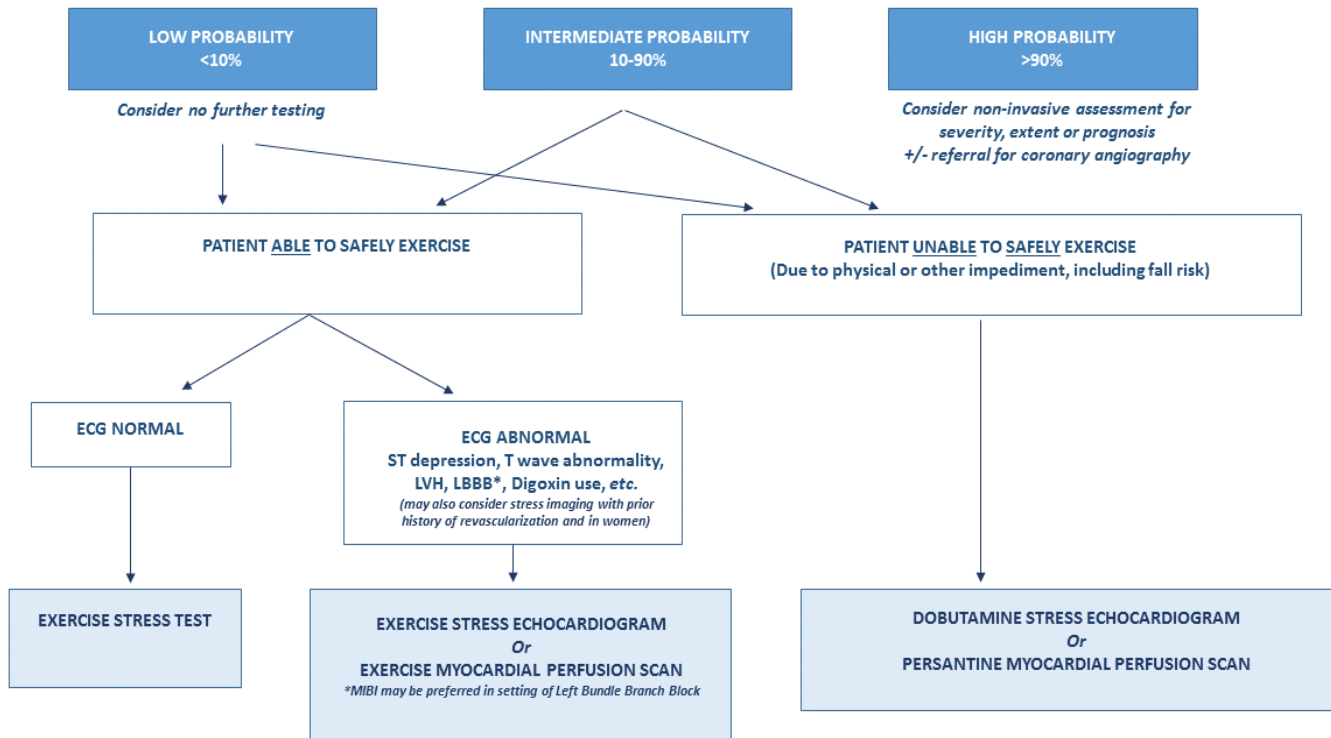
STEP 1. Estimate Pretest Probability of Obstructive Coronary Disease as the cause for the patient's chest pain:

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