

Appointment Date: ..... Time: .....  
 Location: .....

Patient Details

DOB

Phone

Medicare No.

Request For

Clinical Details

Doctor's Details

Copy To

Signature

Date

Consultation & ECG

ECG

Echocardiogram

**Exercise Stress Echocardiogram with Baseline Echocardiogram**

With consultation

Angina: Constricting discomfort in the chest/neck/shoulders/jaw/arms OR exertional symptoms OR relieved by rest/GTN

SOBOE: Undue exertional dyspnoea - ?cause

ECG changes: Consistent with CAD or ischaemia, in a patient without known CAD - ?ischaemia

Known CAD: New or worsening symptoms in patients with known coronary artery disease on medical therapy

Moderate disease: Indeterminate lesion on CTCA/angiogram

Congenital disease: History of congenital heart surgery - ?ischaemia

Pre-op with poor exercise capacity and past medical history of IHD/CVA/CCF/DM on insulin/serum Cr >170

PCI or CABG/Valve Surgery: Assessment of valvular disease or ischaemic threshold

Silent Ischaemia: ?Silent ischaemia or ?Ischaemia in patient with impaired cognition or expressive language skills

**Holter Monitoring (24 Hour)**

Palpitations (more than once a week)

Dizziness, pre-syncope or syncope

Asymptomatic arrhythmia suspected (more than once a week)

Surveillance following cardiac surgical procedures that have an established risk of causing dysrhythmia

**24 Hour Blood Pressure Monitoring**

**Calcium Score (no rebate)**

**CT Coronary Angiogram (CTCA)**

With consultation (bulk billed)

Non-medicare eligible

**MBS INDICATIONS**  
(Please tick)