



# Heart & Vascular

CENTRE FOR CARDIOLOGY

www.heartandvascularcardiology.com

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STONEY CREEK 35 Upper Centennial Pkwy, 2<sup>nd</sup> flr L8J 3W2

HAMILTON 414 Victoria Ave N. Suite M7 L8L 5G8 - **NEW**

BURLINGTON 2079 Lakeshore Road L7R 1E2

## CARDIAC DIAGNOSTICS TESTING

- Treadmill Exercise Stress Test (GXT)
- Recumbent Bike Exercise Stress Test  
\* Suitable for patients who are unable to walk on a treadmill
- Cardiac LOOP Event Monitor  
14 Days of Continuously Monitoring Cardiac Events
- ABPM (Ambulatory Blood Pressure Monitor)  
\* \$60 charge to patient
- HOLTER Monitor       48 HR       24 HR
- 2D Echocardiogram
- ECG

## PULMONARY FUNCTION STUDIES

- Spirometry with Flow Volume Loop
- Pre /Post Bronchodilator

## REFERRING PHYSICIAN - PLEASE COMPLETE

Referring Physician:

Signature Required:

Address:

Billing Number:

Phone Number:

Fax Number:

Date:

## CARDIOLOGY

- 1<sup>st</sup> Available Cardiologist
- Dr.

## CHOOSE PREFERRED LOCATION

- Stoney Creek
- Hamilton
- Burlington

## REASON FOR CONSULT - PLEASE COMPLETE

- PLEASE INDICATE ONE:**
- Consultation & Diagnostic Testing (Choose below OR leave for Cardiologist to determine).
  - Consultation if abnormal test results
  - No Consultation Required. Diagnostic Testing Only.

- Abnormal ECG
- Arrhythmia/Palpitations
- CHF
- Chest Pain
- Dyspnea
- Dizziness/Syncope
- HTN

Clinical Information (or attach) :  
patPROB

## PATIENT INFORMATION - PLEASE COMPLETE OR ATTACH LABEL

Last Name:       First:        Mr.  Mrs.  Ms.

Street Address:       City:       Province:

Home Phone:       Mobile:       Postal Code:

Email:       Date of Birth:

Appointment Date:      Appointment Time:       AM       PM

OHIP Number:       ...ersionCode

**PLEASE FAX ALL REFERRALS TO THE CENTRAL BOOKING LINE 1-855-210-0758**

\*\*\* For URGENT referrals please call our CENTRAL BACK LINE at 1-855-210-0707 or indicate on referral \*\*\*