

Rainbow Medical Centre

RACE (Rapid Access to Cardiac Evaluation Clinic: 72hrs) Date: URGENT (2wks) **SEMI-URGENT (4wks) ROUTINE**

HEALTHY HEARTS PROGRAM (4wks post PCI/CABG)

PATIENT INFORMATION	RFERRING PHYSICIAN
Label Here	Physician Name: Physician Address: Physician PRAC-ID: Physician Signature: Copies To:
REASON FOR REFERRAL:	

CARDIAC TESTING

ECG Echo Height: Echo Bubble Study 24 Hour Holter Monitor Weight: kg lb 48 Hour Holter Monitor **Exercise Stress Test Ambulatory BP Monitor**

CARDIOVASCULAR INDICATIONS *Please check all that apply:*

Abnormal ECG Murmur Palpitations / Arrhythmias Abnormal Treadmill Stress Test Diabetes Yes No CAD / PCI / CABG Shortness of Breath Asthma Yes No Chest Pain Stroke / TIA Pacemaker Yes No CHF / Edema / PND / Orthopnea Syncope / Presyncope ICD Yes No Other: CV Risk Assessment CABG Yes No

PATIENT PREPARATION:

Hypertension / LVH

- Arrive 15 minutes prior to appointment time
- Bring Alberta Health Care Card
- No fasting required

- No perfumes or colognes
- Gown provided; you will be required to undress from waist up

Does your Patient Have:

Appointment may take up to one hour

CALGARY CLINIC:

MEDICINE HAT CLINIC:

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