



**global** leading compassionate care  
cardiology

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patient name:

Medicare No:

address:

Date of Birth:

Contact Number:

### clinical details

- Chest Pain     SOB
- Syncope         Pre Syncope
- Palpitations     AF

Other

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### referral

- Routine     **Urgent**

- Cardiac Consultation (Private fees apply)
- URGENT** Chest Pain Management
- Consultation Request if Abnormal Result**

### INVESTIGATIONS REQUESTED

- Transthoracic Echo
- Exercise Stress Echo\* (includes TTE)
- Resting ECG
- Exercise Stress ECG\*
- Ambulatory Blood Press Monitor (ABPM)
- Single Day Holter Monitor
- Multi-day Holter Monitor

### CT SERVICES (AT WEST PERTH CLINIC)

- Coronary Calcium Score
- CT Coronary Angiogram

ALL TESTS EXCEPT ABPM, CTCA, AND CALCIUM SCORE  
ARE BULK BILLED (WHERE MEDICARE REBATE IS AVAILABLE)

\* for diagnostic stress tests patients are routinely advised to discontinue  
BETABLOCKERS, VERAPAMIL and DILTIAZEM 48 hrs prior to the test.  
Please advise otherwise if NOT to be discontinued.

### referring doctor

name:

phone:

fax:

signature:

date:

provider No:

copy to: