



## Referral Form

Please note: We are not a Cardiology testing service. All patients will be seen for a consultation and tests performed as required during the assessment.

We perform onsite Paediatric Echocardiography, ECG, 24-Hour Holter monitoring, 24-Hour Ambulatory Blood Pressure monitoring and will arrange offsite Exercise Stress Testing where necessary.

Fetal echocardiograms are performed in conjunction with Specialist Obstetric Ultrasound practices.

### Patient Details

Patient name: ..... Date of Birth: .....

Address: .....

.....

Phone: ..... Email: .....

### Clinical History

### Requesting Doctor Details

Referring Dr: ..... Provider No: .....

Phone: ..... Fax: .....

Address: .....

.....

Signature: ..... Date: .....

**Send all referrals to: (F) 03 9347 2001 or (E) info@paediatriccardiology.com.au**