

Knox Heart Centre

Cardiology Request

Knox Private Hospital
Destination 140
262 Mountain Highway Wantirna VIC 3152 P 03 9210 7060 F 039210 7064

Appointment Time: _____ Date: _____

Patient Name: _____

Please Circle: M / F _____ Date of Birth: _____

Address: _____

Phone: _____ Mobile: _____ Medicare number: _____

Transthoracic Echocardiogram Holter Monitor

Clinical Notes: (including cardiac history and medications) _____

Stress Echocardiogram (below indications MUST be completed for the test to attract a Medicare rebate)

- (A) Symptoms of typical or atypical angina
- (A1) Constricting discomfort in the front of the chest, neck, shoulders, jaw or arms
 - (A2) Symptoms are precipitated by physical exertion
 - (A3) Symptoms relieved by rest or GTN within 5 minutes or less
- (B) Known coronary artery disease with one or more symptoms suggestive of ischaemia
- (B1) Not adequately controlled with medical therapy (B2) Have evolved since last functional study
- (C) Other indications
- (C1) Assessment of myocardial ischaemia with exercise is required if a patient with congenital heart lesions has undergone surgery and ischaemia is considered reversible.
 - (C2) Resting 12 lead ECG changes consistent with CAD or ischaemia, in a patient without known CAD
 - (C3) Uncertain functional significance demonstrated on CTCA
 - (C4) Potentially non CAD, which includes undue exertional dyspnea of uncertain aetiology
 - (C5) Pre-operative assessment where functional capacity < 4 METS equivalents indicates the surgery is intermediate to high risk, and the patient has at least one of the following conditions
 - (C5a) IHD or previous MI (C5b) Heart failure (C5c) Stroke or TIA
 - (C5d) Renal dysfunction (C5e) DM requiring insulin therapy
 - (C6) Assessment before cardiac surgery or catheter based interventions is required to
 - (C6a) Increase the cardiac output to assess the severity of aortic stenosis
 - (C6b) Determine whether valvular regurgitation worsens with exercise and/or correlates with functional capacity
 - (C6c) Correlate functional capacity with the ischaemic threshold
 - (C7) Silent myocardial ischaemia is suspected or due to cognitive capacity or expressive language impairment, it is not possible to accurately assess symptom frequency based on medical history.

Referred by: _____ Provider number: _____

Address: _____

Surgery number: _____ Fax: _____

Signature: _____

Copies to: _____

Please note : Patients may take a referral to the diagnostic imaging provider of their choice

A standard echocardiogram and a stress echocardiogram may be claimed only once in a 24 month period when referred by a GP, except for limited specific exemptions documented by Medicare. They cannot be performed on the same day without limiting the Medicare rebate the patient can claim.