



K-2 CARDIAC CARE INC.

CCN Accredited Facility

Dr. Narayanan Krishnan. MD, FRCPC

Dr. David Kazhila. MD, FRCPC

KENT PLACE
Suite 215
189 Kent Street West
Lindsay, Ontario K9V 5G6
Tel: 705 320 9998
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Diagnostic Tests Referral Form

Fax to 705-320 -7778

Please Note: There will be a \$40.00 charge for missed appointments.
No charge if cancelled by 12 pm the day prior to test day

Patient Name _____

Referring Physician _____

Health Number _____

Ref:Phys Billing No _____

Date of Birth _____

Family Physician _____

Patient Tel: _____

Cc Report to _____

Diagnostic Test Requests:

(Please Tick all applicable boxes)

- Echo Doppler (may take up to 1.5 hrs)
- Stress Echo (may take up to 1.5 hrs)
- Resting EKG (no appointment required)
- 24 Hours Ambulatory BP monitoring
- Stress Test (GXT - EKG only)
- Holter Monitor
 - 24 Hours
 - 48 Hours
 - 72 Hours
- If Tests are abnormal, Please Consult
- Supervising Physician to decide any Appropriate / additional testing

Clinical Information / Indications

(Please Print below)

Ref. Physician Sig: _____

Date: _____

* Fast track Consultations will be seen within 48 hrs of receiving the referral *