

**Gold Coast Private Hospital** Specialist Suites 13 & 14 Ground Floor, 14 Hill Street, Southport Qld 4215  
**Pindara Specialist Suites** Suite 2.09, Level 2, Carrara Street, Benowa Qld 4217  
**John Flynn Medical Centre** Suite 6A, Inland Dr Tugun Qld 4224  
**John Flynn Hospital Consulting Suites** Suite 1, 79 Tamar Street Ballina NSW 2478

PATIENT:

DATE OF BIRTH:

ADDRESS:

**APPOINTMENT:**

Date: ..... / ..... / .....

Time: ..... AM / PM  
(QLD Time)

LOCATION: ☐ Southport  
☐ Pindara ☐ Tugun



*...caring for your heart since 1997...*

**CONSULTATION APPOINTMENTS:**

**MICHAEL GREENWOOD**  
Tel 07 5618 5508

**KANG-TENG LIM**  
Tel 07 5618 5518

**JONATHAN CHAN**  
Tel 07 5618 5511

**VIJAY KAPADIA**  
Tel 07 5510 2501

**TONY LAI**  
Tel 07 5586 5305

**THOMAS BUTLER**  
Tel 07 5586 5300

☐
☐
☐
☐
☐
☐

1. ECHOCARDIOGRAM

2. TRANSOESOPHAGEAL ECHO

3. STRESS ECHO

4. EXERCISE STRESS TEST

5. 24 HOUR HOLTER

6. HOLTER WITH EVENT REPORT

7. 24 HOUR BP MONITOR

8. ECG

☐
☐
☐
☐
☐
☐
☐
☐

Disk Required

Yes ☐

No ☐

Please note: A formal consultation is not required in conjunction with a testing appointment. Patients with an abnormal test result will be seen for review by one of our cardiologists; however this must be specifically requested. Please tick the "consultation if abnormal" box below:

☐ Consultation if abnormal

**CLINICAL HISTORY:** .....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

Referring Doctor: .....

Signature: .....

Date: ..... / ..... / .....

Provider No: .....

Copy to: .....

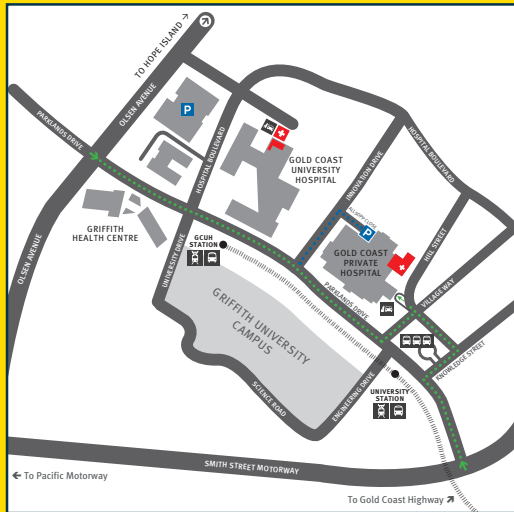
## ***What do I need to do before my appointment:-***

- ♥ Take all medications unless otherwise advised by your Doctor.

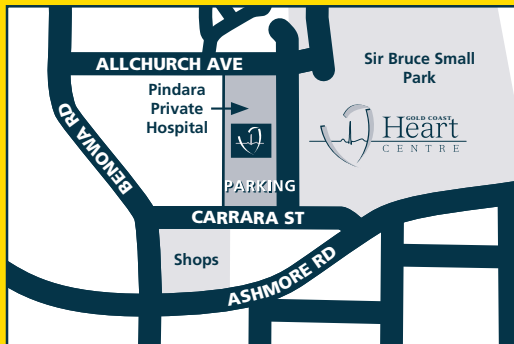
## ***What do I need to bring to my appointment:-***

- ♥ This referral and any other referrals you may require (ie. letters from your referring Doctor).
- ♥ Current list of medications and dosage or alternatively you may wish to bring your medications with you.

### **Southport Rooms**



### **Pindara Rooms**



## **PATIENT PREPARATION**

### ***Stress Test and Stress Echo***

*(Diabetic Patients - please see note below)*

- ♥ Do not eat anything for 3 hours prior to your appointment time.
- ♥ You may drink small amounts of water.
- ♥ Wear comfortable clothing (a 2 piece outfit) and footwear as you will be walking on a treadmill. Ladies will be provided with a gown.

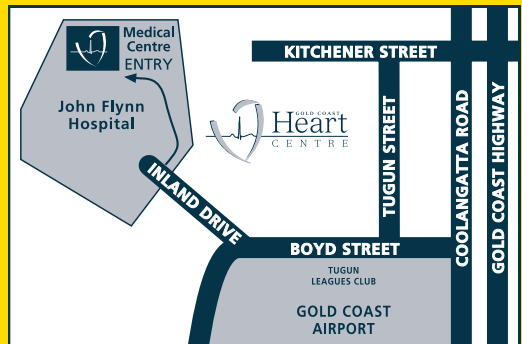
### ***All Other Tests***

- ♥ There are no special requirements.
- ♥ Please wear a loose fitting 2 piece outfit. Ladies will be provided with a gown.

### ***Diabetic***

- ♥ If you are a diabetic please withhold your diabetic medications.

### **Tugun Rooms**



*Your doctor has recommended that you use the Gold Coast Heart Centre. You may choose another provider but please discuss this with your doctor first.*



To re-order, please contact  
our marketing staff on

**Ph: 5531 1833**

or

**Email: [marketing@gchc.com.au](mailto:marketing@gchc.com.au)**

A copy of our Referral can  
also be found on our Website at  
**[www.gchc.com.au](http://www.gchc.com.au)**