

DR ROSS SHARPE

MBBS.FRACP.,FCSANZ.

CARDIOVASCULAR PHYSICIAN AND INTERVENTIONALIST & ASSOCIATES

OUTREACH HEARTS ABN 14 655 598 557

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Name		Medicare Number		
Date of birth		Telephone/Mobile Number		
Address				
APPOINTMENT PRIORITY	(Appointments will be tri	agod)		
SEMI URGENT	ROUTINE (Next Ava			
CARDIAC TESTING SERVICES				
ECHOCARDIOGRAM	24 AMBULATORY I	BP MONITOR	HEART BUG	
STRESS ECG	STRESS ECHOCAR	DIOGRAM	(28 day arrhythmia monitoring)	
CLINIC LOCATION OPTIONS	Moree Inver	ell Tenterfield	Π	
	Armidale Goor	ndiwindi		
TELEHEALTH CONSULTATION (Please attach any relevant medical information) (Southport in Rooms)				
(Flease allacif any relevant medical information) (Soumport in Rooms)				
CLINICAL NOTES				
Referral Doctor		Sig	nature	
Provider number		Date		

Address

TEST DURATION PREPARATION

Stress Test	1 Hour	Fast 2 hrs prior to test (water allowed). Wear comfortable clothing and footwear.
Stress Echocardiogram	1 Hour	Fast 2 hrs prior to test (water allowed). Wear comfortable clothing and footwear.
Echocardiogram	30-45 Minutes	No Preparation.
Renal, Mesenteric Aorto-iliac Scan	1 Hour	Fast 2 hrs prior to appointment. Do not have a heavy meal prior to fasting. Please drink water to keep well hydrated.
ECG	10-15 Minutes	Clean dry skin. No powder or creams.
Other Tests		No preparation.

CONSULTATION APPOINTMENTS

New Patients	Please post or fax your referral and patient information form prior to your appointment. Patient information form is available for download from the website www.coastalhearts.com.au or contact rooms. Please bring fully up to date medication list.	
Review Patients	Please bring an up to date medication list.	
All Patients	Please bring all relevant test results with you.	

PAYMENT OF CONSULTATIONS

Outreach Hearts is not a bulk bill practice. Payment is required in full at the time of the consultation, via cash, eftpos or credit card. Government issued pensioner card holder will pay a reduced fee.