



PATIENT INFO

NAME _____ PHONE (M) _____
DOB _____ GENDER _____ PHONE (ALTERNATE) _____
PHN _____ EMAIL _____

REFERRING CLINICIAN

NAME / MSP _____
FAX _____
SIGNATURE _____ DATE _____

REASON FOR REFERRAL

COPY REPORTS TO

CARDIOLOGY CONSULTATION

- DR. ELI ROSENBERG** (MSP 66533)
Patients may undergo investigations before consultation to support triage.
Please include all available info, including: PMHx, Medications, Allergies, Social Hx, and FHx.
 Relevant consult letters and investigation reports.

TRIAGE

- NEXT AVAILABLE**
 SEMI-URGENT
 URGENT

PULSE **CARDIAC REHABILITATION** **FIT RX** | CARDIOLOGIST | EXERCISE PHYSIOLOGIST | REGISTERED DIETITIAN

- CARDIAC REHAB** – Primary Prevention *
 CARDIAC REHAB – Secondary Prevention * ** No contracts or commitments
Monthly fee is "pay-what-you-want"*

Semi-Urgent Indications:

- New CCS 2 angina, typical
- Severe symptoms, ↓QOL
- Progressive atypical CP
- Frequent syncope with prodrome
- Pre-op semi-urgent surgery
- ? Pericarditis, mild symptoms
- AF with poor rate control
- Severe valve disease + symptoms
- Severe valve disease + ↓LVEF
- Other (similar urgency)

DIAGNOSTICS

Same-day Holters are usually available 7:30 am–3:30 pm. Please have patient call to confirm availability.

- 24-HOUR HOLTER** **ECG**
GECCO Micro24™ + ECG
- 48-HOUR HOLTER** **24-HOUR AMBULATORY BP** (\$75)
GECCO Micro48™ + ECG
- 72-HOUR HOLTER** **EXERCISE STRESS TEST (TREADMILL)**
GECCO Micro72™ Weekend + ECG
ETT requires advance booking
- REPEAT HOLTER** if symptoms not captured
 REPEAT HOLTER if AF/AFL not detected

Urgent Indications:

- New CCS 3 or 4 angina
- Severe ongoing symptoms
- Progressive typical angina
- Syncope without prodrome
- Pre-op urgent surgery
- ? Pericarditis, signif symptoms
- Other (similar urgency)

Use 24h for daily symptoms, 48h as default for most studies, and 72h for infreq symptoms, AF screening, post-stroke/TIA