



PARTNERS IN ADVANCED CARDIAC EVALUATION

To Book an Appointment
 Tel: 1-888-662-0680
 Fax: 1-855-239-1623
 info@pace-cardiology.com
 www.pace-cardiology.com

Web-referral portal is now available. Please call 1-888-662-0680 to set up your account

- Alliston**
117 Young Street
Unit 21-23
Alliston, ON L9R 0E9
Tel: 705-434-5338
Fax: 705-434-5340
- Barrie**
Little Lake Medical Centre
11 Lakeside Terrace, Unit 302
Barrie, ON L4M 0H9
Tel: 705-721-4422
Fax: 705-721-5577
- Newmarket**
Medical Arts Building
581 Davis Drive, Suite 602B
Newmarket, ON L3Y 2P6
Tel: 905-953-7917
Fax: 905-953-0046
- Orillia Soldiers' Memorial Hospital (ECHO only)**
170 Colborne Street West, Room M022
Orillia, ON L3V 2Z3
Tel: 1-888-662-0680
Fax: 1-855-239-1623

PACE's team of physicians includes specialists in General Cardiology, Electrophysiology /Arrhythmia, Interventional Cardiology, Internal Medicine/Vascular Medicine, and Diabetes.

PATIENT INFORMATION

NAME: _____ M F DATE OF BIRTH _____

TELEPHONE: _____ APPOINTMENT DATE: _____

HEALTH #: _____ VRS. CODE _____ APPOINTMENT TIME: _____

CARDIOLOGY PROCEDURES

- Adult ECHO
- Contrast ECHO
- Stress ECHO
- Stress Test
- Event Loop Recorder (ELR)
- 12 Lead ECG
- 24 hrs. Holter Monitor
- 48 hrs Holter Monitor
- 72 hrs. Holter Monitor
- 14 day Holter Monitor
- 24 hrs ABP Monitor (\$50)
- Pediatric ECG
- Pediatric ECHO
- Pediatric Holter Monitor
 24 hrs 48 hrs 72 hrs
- Cardiac Nuclear Imaging***
- Exercise Perfusion Study
- Persantine Perfusion Study
- Myocardial Viability Study
- MUGA
- Vascular Imaging***
- Carotid Doppler
- Arterial Doppler
 Upper (R) (L)
 Lower (R) (L)
 Abdominal
- Venous Doppler
 Upper (R) (L)
 Lower (R) (L)
- Renal Artery Doppler

DOCTOR CONSULTATION**
 Elective Urgent

If test is abnormal please arrange for a consultation

*Nuclear and Vascular Imaging available at Alliston location only

TYPE 2 DIABETES CLINIC

- The primary focus of the clinic is the management of Type 2 Diabetes in patients with documented vascular disease to improve glycemic control and reduce further cardiac complications.

REASON FOR REFERRAL

CLINICAL INFORMATION

Referring MD: _____ MD Signature: _____

MD Billing #: _____ Date: _____

Patient consents to electronic communication of personal health information using email address and/or phone number provided, as explained at www.pace-cardiology.com

Requests for consultations should include the reason for referral, medication list and any previous ECGs, chest x-rays, blood work and cardiac assessment

**** Please be advised we will send you a fax confirmation with your patient's appointment date and time — please contact your patient with this information**

COMMON INDICATIONS FOR TRANS-THORACIC ECHOCARDIOGRAPHY

- Heart murmur
- Chest pain
- Shortness of breath and / or peripheral edema
- CHF
- Unexplained hypotension
- Hypertension
- Stroke or TIA
- Syncope
- Arrhythmia and palpitations
- LBBB or high grade AV block
- LV function after:
 - MI
 - Invasive procedure
 - Every 6 months for patients with severe LV dysfunction
 - Every year with ischemic heart disease
- Rule out endocarditis
- Rule out aortic dissection
- Rule out or follow-up of a pericardial effusion
- Rule out or follow-up of pulmonary hypertension
- Initial assessment or reassessment of a patient with structural heart disease:
 - Valvular regurgitation (every 6-12 months)
 - Valvular stenosis (every 6-12 months)
 - Mitral valve prolapse
 - Cardiomyopathy:
 - Ischemic
 - Dilated
 - Hypertrophic
 - Congenital heart disease
 - Prosthetic heart valves (every year)
 - Cardiac masses
- Evaluation before or after an invasive procedure:
 - Heart surgery
 - PCI
 - Electrophysiology procedures
 - Device placement
 - Structural heart disease procedures
 - TAVI
 - LAA or VSD closure

COMMON INDICATIONS FOR STRESS ECHOCARDIOGRAPHY

- Chest pain
- CHF
- LV dysfunction
- Arrhythmia
- Syncope
- Stroke / TIA or carotid disease (once a year)
- PAD (once a year)
- Assessment of patients at intermediate or high risk of CAD (every 2 years)
- Within 3 months post ACS / MI and every year thereafter
- In patients with:
 - Valvular stenosis
 - Valvular regurgitation
 - Hypertrophic cardiomyopathy
- Pulmonary hypertension