



OHVC

Ohio Heart & Vascular Consultants

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Consultation and Testing Request

Date of referral: _____
Patient Name: _____ DOB: _____
Patient Phone: _____

Referring Physician/PCP Name: _____
Phone: _____ Fax: _____

Consultation request: (check all that apply):

- Urgent consultation visit (same day, please call office (419) 794-7700)***.**
- Preoperative risk assessment
- Consultation and ongoing co-management of patient with PCP
- Other expectations of this consultation _____
- Cardiac catheterization/Invasive procedure
- Vascular Consult

Testing requested: (Please list diagnosis for each test requested)

- Echocardiogram

Stress testing (Patients with stable symptoms. Please check specific test below)

- | | |
|---|--|
| <input type="checkbox"/> Exercise treadmill (requires normal EKG) | <input type="checkbox"/> Exercise Nuclear Cardiolite (pt weight _____) |
| <input type="checkbox"/> Persantine stress test | <input type="checkbox"/> Lexiscan stress test |
| <input type="checkbox"/> Stress echo (can exercise) | <input type="checkbox"/> Dobutamine echo (can't exercise) |
| <input type="checkbox"/> Dobutamine Cardiolite | |
- Holter Monitor
 Event Recorder
 Cardionet (Auto Trigger)

Vascular Testing: (Please note whether bilateral, right or left side when appropriate)

- | | |
|--|---|
| <input type="checkbox"/> Carotid duplex _____ | <input type="checkbox"/> Renal artery duplex |
| <input type="checkbox"/> Segmental Doppler/PVR's | <input type="checkbox"/> Abdominal Aorta duplex |
| <input type="checkbox"/> Arterial duplex _____ | <input type="checkbox"/> Venous duplex |
| <input type="checkbox"/> Subclavian duplex _____ | <input type="checkbox"/> Thoracic outlet evaluation |
| <input type="checkbox"/> Impotency evaluation | <input type="checkbox"/> Other _____ |

Comments/Diagnosis: _____

Preferred follow-up:

- Please call me after seeing this patient
- Routine written communication following consultation is adequate

Signature: _____

Tel: (419) 794-7700 Fax: (419) 794-7715

www.ohioheart.com

FAX to (419) 794-7715