

Patient Details

Name _____

Address _____

Postcode _____ Date of Birth _____

Telephone _____ Medicare No. _____

Services Requested

For these tests, the indications section at the bottom MUST be completed for the tests to be performed.

- | | |
|---|--|
| <input type="checkbox"/> Stress Echocardiogram | <input type="checkbox"/> Consultation |
| <input type="checkbox"/> Dobutamine Stress Echocardiogram | <input type="checkbox"/> Echocardiogram |
| <input type="checkbox"/> Exercise Stress ECG | <input type="checkbox"/> 12 Lead ECG |
| | <input type="checkbox"/> 24 Hour Ambulatory Holter Monitor |
| | <input type="checkbox"/> Event Monitor |
| | <input type="checkbox"/> 24 Hour Blood Pressure Monitor |
| | <input type="checkbox"/> Pacemaker/ICD Check |

Please be aware that new service rules apply to standard echocardiography item numbers. A standard echo can only be claimed once in a 24-month period except for limited specific exemptions documented by Medicare

Clinical Notes

Medicare indications for Exercise Stress ECG, Stress Echocardiogram and Dobutamine Stress Echocardiogram
 You **MUST** tick the appropriate indication below. Stress Echocardiography or Exercise Stress ECG can generally only be claimed once in a 2-year period. Within this time frame, the patient may incur a non-rebateable charge.

Exercise Stress ECG Alone

- Symptoms consistent with cardiac ischaemia
- Other cardiac disease exacerbated by exercise
- First degree relatives with suspected heritable arrhythmia

Stress Echocardiogram and Dobutamine Stress Echocardiogram

A – Symptoms of typical or atypical angina

- A1 – Constricting discomfort in the chest, neck, shoulders, jaw or arms
- A2 – Exertional symptoms
- A3 – Symptoms relieved by rest or GTN

B – Known coronary artery disease with one or more symptoms suggestive of ischaemia

- B1 – Not controlled with medical therapy
- B2 – Have evolved since last functional study

C – Other indications

- C1 – PHx congenital heart surgery ? ischaemia
- C2 – Abnormal resting ECG ? ischaemia
- C3 – Indeterminate lesion on CTCA
- C4 – Shortness of breath on exertion (SOBOE) ? Cause
- C5 – Pre-operative with poor exercise capacity and PHx of IHD, CVA, DM on insulin, or serum Cr >170
- C6 – Assessment of valvular disease or ischaemic threshold during exercise prior to intervention
- C7 - ? ischaemia in patient with impaired cognition or expressive language skills

Referring Doctor

Name _____

Address _____

Telephone _____

Provider No. _____

Signature _____

Date _____

- Report** Post
- Facsimile
- Secure Email

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