



ORLEANS

Cardiopulmonary Group

Groupe Cardiopulmonaire d'Orléans

- Bring appropriate exercise clothing, running shoes, water bottle, and a towel.
- Light breakfast only
- Bring your mask and medications with you.
- You have been advised by your physician to:
 - Continue all medications
 - Hold the following medication(s) before the test:
 - _____ for ___ day(s)
 - _____ for ___ day(s)

Patient: _____

Information: _____

Cardiology Consultation

- Dr. Roland Sabbagh
- First available Cardio/Internist

Respirology Consultation

- Dr. Mathieu Saint-Pierre

Cardiovascular Internist (Hypertension/CKD/Diabetes)

- Dr. Carolyn Tharson
- URGENT

Indication

- Chest pain
- Palpitations
- Syncope
- CV risk assessment

- Dyspnea
- Cough
- Abnormal imaging

Other: _____

Medications Held ?

- | | | |
|---------|--------------------------|--------------------------|
| Digoxin | <input type="checkbox"/> | <input type="checkbox"/> |
| BB | <input type="checkbox"/> | <input type="checkbox"/> |
| CCB | <input type="checkbox"/> | <input type="checkbox"/> |

Testing and Therapeutic Services

- ECG
- Exercise treadmill test
- Exercise Stress Echocardiogram
- Pharmacologic Stress Echocardiogram

- Echocardiogram
- Echocardiogram with lung ultrasound (dyspnea workup)

- 72 hour Holter
- 2 week Holter
- Ambulatory BP Monitor ¹

- Spirometry

¹ Note that the ABPM is not covered by OHIP

Referring MD: _____

Provider Number: _____

CC: _____

Date: _____

Signature: _____

570 Lacolle Way, Ottawa, Ontario, K4A 0N9

Please send requisitions by FAX to: (613) 841-6770 – Referrals can be sent through OCEANS

Telephone (613) 699-3376

Website: OCPG.clinic