



Orillia Soldiers' Memorial Hospital

Room 281, Diagnostic Imaging 170 Colborne Street West, Orillia, ON L3V 223

To Book an Appointment Fax: 1-855-239-1623 In-Patient ECHO Tel: 705-325-2201 ext: 6314 In-Patient OSMH Fax ext: 4182 referral@pace-cardiology.com www.pace-cardiology.com

Tel: 1-888-662-0680

PATIENT INFORMATION	
NAME:	
SPECIAL INSTRUCTIONS	
INPATIENT ECHOCARDIOGRAPHY ADULT PEDIATRIC (newborn to 18 years-old) Chest pain Myocardial infarction Shortness of breath or peripheral edema CHF Unexplained hypotension Stroke or T IA Syncope Arrhythmia LBBB or high grade AV block Rule out endocarditis	OUTPATIENT ECHOCARDIOGRAPHY ADULT PEDIATRIC (newborn to 18 years-old) Murmur Hypertension Palpitations LV function post MI Invasive procedure Every 6 months for patients with severe LV dysfunction Every year with ischemic heart disease Follow up pulmonary hypertension Initial assessment or reassessment of structural heart disease
Rule out pericardial effusion Rule out pulmonary hypertension Evaluation pre- or post- procedure CV surgery PCI/TAVI EP procedure/Device placement	Valvular regurgitation/stenosis (every 6-12 months) Prosthetic heart valves (every year) Cardiomyopathy Congenital heart disease Cardiac masses
CLINICAL INFORMATION	
CPSO # : BILLING # :	SIGNATURE