

**RACC[™] cardiology clinic
Referral**

Referral Date: _____

Referring Information

Name: _____

Specialty: _____ PRACID: _____

Phone: _____ Fax: _____

Family MD Name: _____

Patient Demographics

Last Name: _____ First Name: _____

PHN: _____ Gender: _____

Phone: _____ DOB: _____
(mm/dd/yyyy)

Address: _____

Ref. Location: ER Dept.: _____ Urgent Care: _____ Clinic/Office: _____

General Cardiology and Chest Pain Assessment

(Appointment with the Next Available Cardiologist)

Check if this is a request for second opinion.

Reason(s) for Referral:

Appt Date/Time: _____

Symptoms:

- Chest Pain
- Dyspnea
- Edema
- Palpitations
- PreSyncope
- Syncope
- Fatigue

Risk Stratification:

- Global CV risk stratification
- Pre-op CV risk assessment

Diagnoses and History:

- | | | |
|--|---|--|
| <input type="checkbox"/> Atrial Fibrillation/Flutter | <input type="checkbox"/> Endocarditis | <input type="checkbox"/> Hypertension |
| <input type="checkbox"/> Ischemic Heart Disease | <input type="checkbox"/> Myocarditis | <input type="checkbox"/> Dyslipidemia |
| <input type="checkbox"/> Myocardial Infarction | <input type="checkbox"/> Pericarditis | <input type="checkbox"/> Diabetes Mellitus |
| <input type="checkbox"/> Heart failure | <input type="checkbox"/> Rheumatic Fever | <input type="checkbox"/> Other vascular disease risk factors |
| <input type="checkbox"/> Cardiomyopathy | <input type="checkbox"/> CABG /Bypass | <input type="checkbox"/> PVD/Stroke/TIA |
| <input type="checkbox"/> Valvular heart disease | <input type="checkbox"/> Angioplasty /Stent | |
| <input type="checkbox"/> Heart murmur NYD | <input type="checkbox"/> Valvular surgery | |
| <input type="checkbox"/> Abnormal Resting ECG | <input type="checkbox"/> Pacemaker or ICD/CRT | |
| <input type="checkbox"/> Abnormal Stress Test | <input type="checkbox"/> Cardiac masses or thrombus | |
| <input type="checkbox"/> Abnormal Coronary CT | | |

Pretest likelihood of Coronary Artery Disease? Very Low Low Intermediate High Known CAD

(Based on age, gender, +/-symptoms. Refer to the guidelines on the 2nd page of this requisition.)

Additional History/
information

You can choose TotalCardiology as your ECG interpreter on your CLS or lab requisition form.

**MD signature/
Clinic name/
STAMP**

Guide for assessing pretest likelihood of Coronary Artery Disease

(based on age, gender, +/- symptoms: typical angina, atypical angina, nonanginal chest pain, asymptomatic)

Age (years)	Gender	Typical Definite Angina	Atypical Probable Angina	Non-anginal Chest pain	Asymptomatic
30-39	Men	Intermediate	Intermediate	Low	Very low
	Women	Intermediate	Very low	Very low	Very low
40-49	Men	High	Intermediate	Intermediate	Low
	Women	Intermediate	Low	Very low	Very low
50-59	Men	High	Intermediate	Intermediate	Low
	Women	Intermediate	Intermediate	Low	Very low
60-69	Men	High	Intermediate	Intermediate	Low
	Women	High	Intermediate	Intermediate	Low

- For men older than 70, with atypical or typical symptoms, assume an estimate of >90%.
- For women older than 70, assume an estimate of 61-90% EXCEPT women at high risk AND with typical symptoms then a risk of >90% should be assumed.
- If there are resting ECG ST-T changes or Q waves, the likelihood of CAD is higher in each cell of the table.

From N Eng J Med, Diamond G.A. and Forrester J.S.,
 Analysis of Probability as an Aid in the Clinical Diagnosis
 of Coronary-Artery Disease. 300: 1350-1358.
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