TOWNSVILLE CARDIOVASCULAR GROUP

Level 2 Suite 4, Mater Medical Centre, 25 Fulham Road, Pimlico QLD 4812
(07) 4779 0199 reception@tcva.com.au www.tcva.com.au

PATIENT REFERRAL

SELECT A DOCTOR:

- ☐ **Dr Soniah Moloi** B.MED (NEWCASTLE) FRACP, FCSANZ
- ☐ **Dr Anudeep Gupta** B.MED (NEWCASTLE) FRACP (CARDIOLOGY)
- ☐ **Dr Rosh Samuel** (Paediatric Cardiologist) MBBS, DCH, FRACP
- ☐ **Dr Lim Eng** MBBS, MBCHB, FRACP
- ☐ **Dr Bijan Jahangiri** MD, FRACP

PATIENT'S DETAILS:

Name:

Phone:

Email:

Date of Birth:

SELECT A TREATMENT:

- ☐ Consultation
- ☐ Exercise Stress Echocardiogram
- ☐ ECG
- ☐ Blood Pressure Monitor
- ☐ Echocardiogram
- ☐ Holter Monitor
- ☐ Exercise Stress Test

EXAMINATION REQUIRED:

Indications and Clinical Details:

REFERRING DOCTOR DETAILS:

Doctor's Name:

Doctor's Address:

Provider No.:

Date: