Duke Cardiology

OFFICE USE ONLY

Appt Date:_____/_____/_____

Time:_____:_____ am / pm

Faxed:_____/_____/_____

We appreciate your referral.
Please fax the completed referral form to 919-681-7177
or use electronic referral through Epic / MedLink*.

Once received, we will call your office back with an appointment for your patient. Incomplete forms may delay the scheduling process. A summary of our findings and recommendations will be faxed the same day of your patient's appointment.

Consultation Request

Date and Time of Request: _____

Patient Name: _____

Duke History or MR#: _____ Date of Birth: _____

Address: _____

Best # to reach patient: _____ ☐ Work ☐ Cell ☐ Home Emergency Contact #: _____

Referring Physician Name (Print): _____ Signature with Credentials: _____

Office Phone: _____ Office Address: _____

Service(s) Requested

- ☐ Cardiology consultation/evaluation
- ☐ Pacemaker/ICD placement/evaluation
- ☐ Risk-factor management
- ☐ Echocardiogram
- ☐ Stress echocardiogram
- ☐ Treadmill/exercise test
- ☐ Abdominal aortic aneurysm screening ultrasound
- ☐ Ankle brachial index (exercise)
- ☐ Ankle brachial index (rest)
- ☐ Lower extremity arterial ultrasound
- ☐ Carotid ultrasound
- ☐ Holter monitor

  Circle: 24 hr / 48 hr / 3-7 day / 7-15 day / 15-30 day
- ☐ Non-Holter event monitor

  Circle: MCT / 30 Day patient activated
- ☐ Ambulatory BP monitor
- ☐ Nuclear Stress Imaging
- ☐ Rest MUGA scan
- ☐ Other _____

Clinical Information

If available, please fax copy of: ☐ **EKG** ☐ **Prior cardiac study(ies)** ☐ **Labs** ☐ **Most recent clinical notes**

Appointment Need: ☐ Urgent (same day) ☐ ASAP (within 3 days) ☐ Not urgent (within 7 days)

Name of Preferred Cardiologist: _____

Primary Concern: _____

Symptoms/Diagnosis: _____ Diagnosis Code: _____

Preferred Clinic Location: _____

Insurance Information (attach copy of card if available)

Company: _____ Subscriber ID: _____ Subscriber DOB: _____

Group Number: _____ Subscriber Name: _____

Insurance Contact Number: _____

Referral or Pre-Cert Number: _____

*MedLink is a secure, web-based application that allows referring providers quick and convenient read-only access to view patients' medical records, place orders and referrals, and send secure messages to Duke physicians. Learn more at Physicians.DukeHealth.org/MedLink

DukeHealth