



Horizon Cardiopulmonary Diagnostics

Urgent Cardiology Referral Form: Emergency Departments

PATIENT TO MAKE OWN APPOINTMENT

Doctor instructions: Fill out boxes (1), (2), (3); then give to the patient. No other info/results/documents needed.

If the patient has a primary cardiologist: don't use this form; refer to the primary cardiologist.

(1)	Patient	Name: _____ PHN: _____ DOB: _____ (handwrite or place patient sticker)
(2)	Referring doctor	
(3)	Reason	<input type="checkbox"/> Chest pain <input type="checkbox"/> Palpitations <input type="checkbox"/> Syncope <input type="checkbox"/> Risk stratification Other (1-5 words): _____

Patient Instructions

- Your doctor would like you to be seen urgently by a cardiologist (heart specialist).
- You must make your own appointment one of these ways:

Call: 306-518-9081

Email: ums.hcpd@gmail.com

Go to the office: 201 - 1260 Baltzan Boulevard, Saskatoon SK S7W1E8

Monday to Friday (except holidays), 8:30 AM - 4:30 PM

- Bring this form and your current medication list to your appointment.