CARDIAC CARE NETWORK





Patient Information FAX Cover Sheet Outpatient Direct Cardiac Catheterization Kingston General Hospital

Cardiac Services at Kingston General Hospital Fax Number 1-613-548-2407 Date: _____ From: _____ Number of Pages Including Cover: ______ Documents attached: ☐ CCN Referral Form (completed and signed) ☐ Current History & Physical □ Demographic Information ☐ Lab work – CBC, Electrolytes, Urea, Creatinine, INR, PTT, Glucose (results from within the past 3 months) ☐ Medication List (Anticoagulants and Metformin need to be held pre-procedure) ☐ Allergies for both food and drugs. Please note if the patient is allergic to **IVP dye or shellfish**, they will need pretreatment. ☐ CXR Report □ EKG ☐ EST/MIBI/ECHO report and any other pertinent test results ☐ For urgent requests, please call the KGH Regional Cardiac Care Coordinator, Louise Snider at 613-548-1399 ext. 2