



Cardiology Outpatient Order Form

Lake Forest Hospital

Diagnostic Cardiology
660 N. Westmoreland Road
Lake Forest, Illinois 60045-1696
(847) 535-8000 TEL (847) 535-8001 FAX
lfh.org

Thank you for referring your patient for Diagnostic Cardiology services at Lake Forest Hospital. Appointments for service should be made by calling Central Scheduling at (847) 535-8000, or by faxing orders to (847) 535-8001.

Patients should enter the hospital's main entrance to the Registration Department **30 minutes** before their appointment. Registration Department hours are 6:00 a.m. to 6:00 p.m. (Mon-Fri) and 6:00 a.m. to 12 noon (Sat). At all other times, patients should register in the Emergency Department. At our satellite locations, patients should arrive **30 minutes** before their appointment. For questions or any further information, please call Diagnostic Cardiology at (847) 535-8072.

In order to provide the best possible services to you and your patients, we request the following information. Please complete all fields to expedite your request.

PATIENT INFORMATION

Last Name	First Name

Date of Birth	

Home Phone Number	Work/Cell Phone Number

PHYSICIAN INFORMATION

Referring Practitioner Last Name	First Name

NPI #	Practitioner's Fax Number

Cardiologist to Interpret	

Practitioner's Signature	Date

DIAGNOSTIC CARDIOLOGY

- Adenosine/Lexiscan stress test
- _____
- Dobutamine stress echo test
- Echocardiogram
- Electrocardiogram (ECG/EKG)
- Exercise stress test
- Holter Monitor
- Stress echo test
- Tilt table test
- Thallium stress test
- Transesophageal Echocardiography (TEE)
- Other:
- _____
- _____
- _____

NOTE: Tests in **bold** require advanced beneficiary notice at time of testing.

SIGNS & SYMPTOMS / DIAGNOSIS / ICD-9

When ordering multiple tests on the same order form, please indicate a sign, symptom, diagnosis or ICD-9 for each test/treatment. Do not include a "rule-out" diagnosis.
