

DR. SUNIL P.KAUSHIK MBBS(Hons)UNSW, FRACP,FAMS

Consultant Gastroenterologist and Endoscopy Service

Phone: (08) 9301 4437 | (08) 6406 1807 | (08) 6406 1806 or Fax: (08) 9301 4438

Email: bookings.westendo@inet.net.au

Consultation/Private Endoscopy

West Coast Endoscopy Centre 1/32 Pimlico Pl, Joondalup 6027

Public Endoscopy Site

Osborne Park Hospital

Patient Details:

Surname _____ First Name _____

Date of Birth _____ Phone _____

Address _____

Referring Practitioner:

Dr _____ Date _____

Address _____

Provider No _____ Sign _____

Phone + Fax Numbers _____ / _____

Account Information:

Private Insured DVA

Self Insured

Service Required:

Consultation Open Access Colonoscopy

Open Access Endoscopy Capsule Endoscopy

FOR OPEN ACCESS PROCEDURES, DOCTOR TO FAX COMPLETED REQUEST ON 9301 4438 AND ASK PATIENT TO CALL TO MAKE BOOKING PATIENT TO SEND IN FORM, IF NOT FAXED.

Indication:

- | | | | |
|-----------------------------------|--------------------------|------------------|--------------------------|
| G.I Bleeding | <input type="checkbox"/> | Reflux | <input type="checkbox"/> |
| Vomiting / Nausea | <input type="checkbox"/> | Pain / Dyspepsia | <input type="checkbox"/> |
| Colon Cancer Family | <input type="checkbox"/> | Dysphagia | <input type="checkbox"/> |
| Abnormal Radiology | <input type="checkbox"/> | Anaemia | <input type="checkbox"/> |
| Constipation / Diarrhoea | <input type="checkbox"/> | Other | <input type="checkbox"/> |
| Positive Faecal Occult Blood Test | <input type="checkbox"/> | | |

Current Drugs:*

- | | | | |
|-----------------------|--------------------------|-------------------|--------------------------|
| Brilinta / Ticagrelor | <input type="checkbox"/> | Pradaxa / Xarelto | <input type="checkbox"/> |
| Warfarin / Heparin | <input type="checkbox"/> | Plavix / Aspirin | <input type="checkbox"/> |
| Steroids | <input type="checkbox"/> | Drug allergies | <input type="checkbox"/> |
| Insulin | <input type="checkbox"/> | if yes: | |
| Other | | | |

Concurrent Illness:* (must be stable for open access)

- | | | | |
|-----------------------|--------------------------|-------------------|--------------------------|
| Heart Disease | <input type="checkbox"/> | Diabetes | <input type="checkbox"/> |
| Pulmonary Disease | <input type="checkbox"/> | Renal Failure | <input type="checkbox"/> |
| Cerebral ischaemia | <input type="checkbox"/> | Bleeding disorder | <input type="checkbox"/> |
| Coronary Artery Stent | <input type="checkbox"/> | | |

Other:

***IMPORTANT INFORMATION FOR OPEN ACCESS CASES**

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