



PeninsulaEcho

Request Form for Transthoracic Echocardiography

Suite 18
Peninsula Specialist Suites
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Kippa-Ring QLD 4021
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BScApp. MScSt. DMU. AMS.

Patient details - Please complete in full

Name: _____

DOB: _____

Hospital UR: _____

Phone: _____

Address: _____

Clinical details

Early cardiomyopathy screen - Myocardial strain imaging

Referred by: _____

Provider Number: _____

Signed: _____ Date: ___ / ___ / ___

Medical Objects Ref: _____

Practice Details: _____

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Patient Information

- Echocardiography is the term given to the ultrasound examination of your heart. It is a test in which high frequency sound waves are used to create a moving picture of your heart and blood flow.
- No particular preparation is required for the test.
- You will be asked to change into a gown, so the sonographer may take ultrasound images of your heart through your chest wall. A two piece outfit is most suitable.
- The examination will take up to 45 minutes.
- You will not be exposed to any radiation during the examination.
- Please ensure you are accompanied by a carer if required.

Clinic Location

