Precision Heart Rhythm
Dr Jay Patel

Precision Heart Rhythm

Jaydutt Patel, MD - Cardiac Electrophysiologist
7640 W Sylvania Ave, Suite G - Sylvania, OH 43560
Phone: 419-754-3278 - Fax: 844-812-0035

NEW PATIENT REFERRAL FORM

REFERRING PROVIDER

Provider Name: _____

Practice/Clinic: _____

Phone: _____

Fax: _____

PATIENT INFORMATION

Patient Name: _____

DOB: _____

Patient Phone: _____

Insurance: _____

REASON FOR REFERRAL (check all that apply)

- ☐ Atrial Fibrillation / Flutter
- ☐ SVT
- ☐ Ventricular Arrhythmia
- ☐ Bradycardia / Heart Block
- ☐ Palpitations
- ☐ Syncope / Near Syncope
- ☐ Device Evaluation (PPM/ICD/Loop)
- ☐ Ablation Consultation
- ☐ Medication Management
- ☐ Other _____

URGENCY

- ☐ Routine
- ☐ Semi-Urgent (2-4 weeks)
- ☐ Urgent (<=72 hrs - please call)

ATTACH (if available):

- ☐ Office note
- ☐ EKG
- ☐ Echo
- ☐ Monitor
- ☐ Stress
- ☐ Cath/EP report
- ☐ Labs
- ☐ Discharge summary

CLINICAL SUMMARY / QUESTION FOR SPECIALIST

PATIENT CONSENT

☐ Patient has been informed of this referral and agrees to be contacted.

Referring Provider Signature: _____ Date: _____