Medical



☐ Mayo Specialist Centre,

Taree NSW 2430

Potoroo Drive.

Patient Det	tails						
Name:							
Date of Birth:			Te	lephone:			
Medicare Numb	er			Ref		Exp:	
Health Fund:				Membership No:			
Cardiologis	it 🔲 Dr Arshad K	han \square	Dr Akash	Dhawan	☐ Dr Greg Bel	lamy	
Cardiac Inv	restigation 🗆 🖯	rgent 🗌 Rou	utine				
☐ Holter Moni	ess Echocardiogram tor	☐ Event M	1onitor	□ ECG			
Medications:							
_	Doctor Details						
Dr Phone:			D	r Email:			
Date:			Pr	rovider No:			
Address:							
Signature:			C(C:			
Locations	Mayo Private Hospital		Forste Private H			health c .care	

☐ Forster Private Hospital – Dolphin Suite,

5A South Street,

Forster NSW 2428