

## REFERRAL FORM

Phone: (780) 932-3455

Fax: (780) 669-7081

www.precisionpd.ca

### PATIENT DEMOGRAPHICS (Please print or attach label)

PHN: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Sex: ☐ M ☐ F Identify as: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Home Phone #: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

### ASSESSMENTS/DIAGNOSTICS

- ☐ Full Pulmonary Function Test and Oximetry
- ☐ Arterial Blood Gas (Spirometry Included)
- ☐ Spirometry
- ☐ Spirometry/DLCO
- ☐ Methacholine Challenge Test (Spirometry Included - please attach any PFT/Spirometry performed in past 6 months)
- ☐ Pulse Oximetry/Respiratory Assessment
  - ☐ At Rest
  - ☐ On Exertion
- ☐ Testing to Maintain Ongoing AADL Funding (May require Level III Sleep Study, PFT, ABGs, 6 Minute Walk Test, Pulmonary Consult)
- ☐ Sleep Apnea Testing/Treatment (Level 3 Sleep Study (HSAT), Assessment, Auto CPAP Trial and Treatment)
- ☐ Sleep Specialist Consult
- ☐ Pulmonary Consult

### THERAPIES

- ☐ AutoCPAP Therapy \_\_\_\_ cmH2O to \_\_\_\_ cmH2O
- ☐ Fixed CPAP Therapy \_\_\_\_ cmH2O
- ☐ Oxygen Therapy
  - ☐ Keep SpO2 > 90%
  - ☐ Flow Rate: \_\_\_\_\_ LPM
- ☐ Palliative Home Oxygen  
(Please specify palliative diagnosis) \_\_\_\_\_

### REASON FOR REFERRAL

- ☐ Dyspnea ☐ Cough
- ☐ Query COPD ☐ Evaluate COPD
- ☐ Query Asthma ☐ Evaluate Asthma
- ☐ Query ILD ☐ Evaluate ILD
- ☐ Pre-Op Assessment ☐ Home Oxygen Funding
- ☐ Fatigue

Other: \_\_\_\_\_

### PHYSICIAN SIGNATURE

Additional Comment/Considerations: \_\_\_\_\_

Referring Physician: \_\_\_\_\_ PRAC ID: \_\_\_\_\_

Physician Signature: \_\_\_\_\_ Date of Referral: \_\_\_\_\_

Physician Phone: \_\_\_\_\_ Physician Fax: \_\_\_\_\_

**FAX COMPLETED FORM TO (780) 669-7081**

Collaboration-In-Care With:



Respiratory  
Dynamics



## LOCATIONS

### PRECISION PULMONARY DIAGNOSTICS



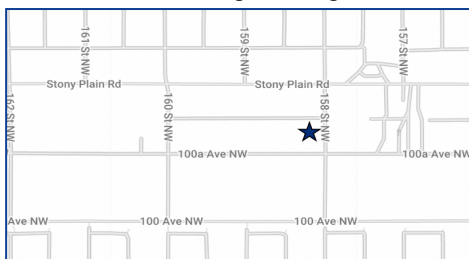
#### St. Albert

102-225 Carleton Drive (in Kingsridge Medical)  
**Services: PFT, Spirometry, ABG, Methacholine Challenge Testing**



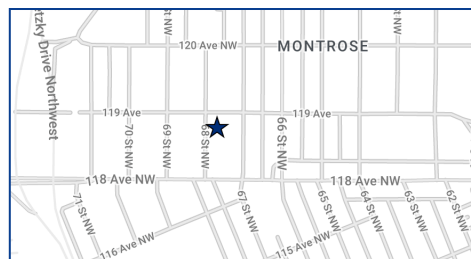
#### Edmonton - West/Canora

15803 100A Avenue NW (in Canora Medical & Hyperbaric Clinic)  
**Services: PFT, Spirometry, Methacholine Challenge Testing**



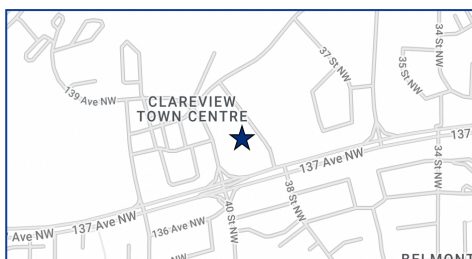
#### Edmonton Northeast/Beverly

11809 68th Street NW (in The Allergy Clinic)  
**Services: PFT, Spirometry, Methacholine Challenge Testing**



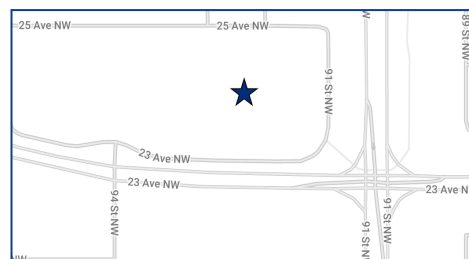
#### Edmonton - North Central/Clareview

3804 137 Avenue NW (in Eastgate Medical)  
**Services: PFT, Spirometry, Methacholine Challenge Testing**



#### Edmonton - South

215-9148 23rd Avenue (in Edmonton Weight Management Centre)  
**Services: PFT, Spirometry, ABG**

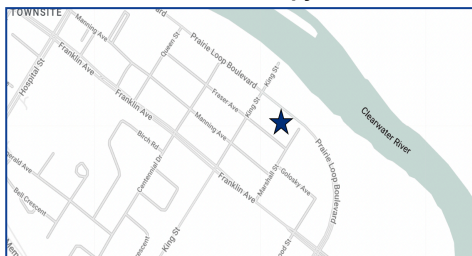


### RESPIRATORY DYNAMICS SLEEP GROUP



#### Ft. McMurray

8106 Fraser Avenue #55 (in Maxwell Medical Clinic)  
**Services: HSAT (Level III Sleep Study), CPAP Therapy**



### RESPIRATORY DYNAMICS HOME OXYGEN



#### Edmonton

18035 107 Avenue NW  
**Services: Home Oxygen Therapy, Portable Suction, Aerosol Therapy, Respiratory Assessment**

