

Rapid Access Endoscopy Request



**SYDNEY
GASTROENTEROLOGY
AND LIVER GROUP**

Requested Procedure *

- Gastroscopy
- Colonoscopy
- Gastroscopy and Colonoscopy
- Consultation prior to Endoscopy

Referral To *

- Dr Saurabh Gupta
- Dr Simmi Zahid
- Dr Thao Lam
- Dr Rose Trieu

Patient's Details

Title *

First Name *

Last Name *

Date of Birth *

Address *

Suburb *

State / Territory *

Postcode *

Mobile Phone

Work Phone

Medicare

Exp Date

Private Health Fund

Membership Number

Referring Doctor

Title *

First Name *

Last Name *

Address *

Suburb *

State / Territory *

Postcode *

Phone Number *

Fax Number

Provider Number *

Date of Referral *

Email Address *

Signature *

Clinical Information

Reason for Endoscopy *

- Positive Faecal Occult Blood Test (FOBT)
- Abnormal CT / MRI without bowel obstruction
- Change in bowel habit
- Family history of bowel cancer / Screening
- Surveillance (Prior Polyps / Cancer)
- Unexplained Weight Loss
- Iron Deficiency / Anaemia
- GI Bleeding
- Other

Please describe

Past Medical History

- Heart condition
- Respiratory disease
- Diabetes
- Renal impairment
- Liver disease
- Other

Please describe

Medication

- Anticoagulant
- Antiplatelet
- Anti-arrhythmic agent
- Insulin
- Allergies

Anticoagulant

Antiplatelet

Anti-arrhythmic agent

Insulin

Allergies

In the presence of other significant health concerns / comorbidities, patients should have a consultation prior to any endoscopic procedure; please do not refer such patients for direct access endoscopy.

For further enquiries, please contact T: (02) 9480 6210 F: (02) 8008 1625 E: admin@gastroandliver.com.au

Sydney Gastroenterology and Liver Group

Suite 213, San Clinic Tulloch
Sydney Adventist Hospital
185 Fox Valley Rd
Wahroonga NSW 2134