

APPOINTMENTS CAN BE MADE BY CALLING 1-877-849-3637

LifeLabs labels		
Ordering healthcare provider information		Patient information
Billing number: Name: Address: No Street City Province Postal code Telephone: Fax:		Last name (as per OHIP card): First name (as per OHIP card): Date of birth: MM/DD/YYYY Sex: <input type="checkbox"/> F <input type="checkbox"/> M <input type="checkbox"/> Other Address: No Street City Province Postal code Telephone: Health card #: Version:
<input type="checkbox"/> Copy to: Clinical/Practitioner Last name: First name: Address:		
Holter Monitoring - To be filled by the ordering healthcare provider		
Holter Monitoring options		Indications
Please check off the testing option you would like to order for your patient: <input type="checkbox"/> 72 hours (e.g., post MI or stroke) <input type="checkbox"/> 14 days (e.g., Atrial fibrillation) <input type="checkbox"/> Other (24 hours, 48 hours or 7 days) If other is selected, please specify the duration _____		<input type="checkbox"/> Abnormal ECG <input type="checkbox"/> Palpitations <input type="checkbox"/> Syncope / Fainting Spells <input type="checkbox"/> Presyncope / Light-headedness <input type="checkbox"/> Chest Pain / Shortness of Breath <input type="checkbox"/> Fatigue / Weakness <input type="checkbox"/> R/O Atrial Fibrillation / Flutter <input type="checkbox"/> Sports cardiology <input type="checkbox"/> Atrial Fibrillation Rate Control <input type="checkbox"/> Unexplained stroke / TIA <input type="checkbox"/> Post MI / Valve procedure <input type="checkbox"/> Medication effect <input type="checkbox"/> Ventricular Arrhythmia <input type="checkbox"/> Pacemaker <input type="checkbox"/> VVI <input type="checkbox"/> DDD <input type="checkbox"/> Other: _____
Ambulatory Blood Pressure Monitoring (ABPM)* - To be filled by the ordering healthcare provider		
<input type="checkbox"/> 24-Hour Ambulatory Blood Pressure Monitoring (ABPM)  *There is a \$85 fee for ABPM. It is not covered by OHIP.		Indications <input type="checkbox"/> Obtain baseline (e.g. fluctuating readings, suspected hypertension, episodic or white-coat hypertension) <input type="checkbox"/> Drug-resistant hypertension suspected <input type="checkbox"/> Patient experiencing hypotensive symptoms with antihypertensive therapy <input type="checkbox"/> Patient exhibiting autonomic dysfunction
Current medications		
<input type="checkbox"/> Pacemaker <input type="checkbox"/> Implanted cardiac defibrillator		
X _____ Clinician/Practitioner signature		
_____ Date		

For any inquiries, please contact Cardiac Services: [oncardiac@lifelabs.com](mailto:oncardiac@lifelabs.com)

#### How to prepare for Holter Monitor setup appointment?

Patients need to ensure the appointment is booked for hook-up, and to bring the paper requisition provided by the HCP to the appointment. Patient Instructions:

- Shower or bathe just prior to appointment.
- DO NOT use talcum, lotions or perfumes.
- Wear a comfortable outfit, which opens in the front.
- Bring a list of all current medications.
- For patients with pacemakers, bring the pacemaker card with the latest setting.
- Patients should wear a comfortable bra, as they will be required to wear it during the entire recording duration.
- Men should be aware that shaving will be required to remove any chest hair where sensors are attached.
- Disconnect time -the device must be removed by a qualified LifeLabs professional.

#### How can patients ensure the Ambulatory Blood Pressure Monitoring test is effective and provides quality results?

This test is meant to measure blood pressure in a natural setting, as you perform normal activities. However, there are some steps patients can take to ensure the test is effective:

- Wear a short-sleeved shirt or blouse to the test.
- When the cuff is inflating and taking a reading, try to limit movement and sit down, if possible.
- The cuff should be at heart level, and avoid any arm movement during the reading for best results.

**Note:** Some individuals are sensitive to the pressure of the cuff inflating. This should be discussed with the healthcare provider when deciding if ABPM is right for you.