

Patient Information and Physician Order Sheet

Memorial Cardiology Services

C2

Patient Name: _____ **Patient DOB:** _____

(Please bring this sheet with you at time of service.)

Appointment Date: _____ **Arrival Time:** _____ **Procedure Time:** _____

Diagnosis (ICD Code Required): _____

Ordering Physician (Signature): _____

(Printed): _____

(Date): _____ (Time): _____

Procedure Scheduled: ECHOCARDIOGRAM

Prep: Wear a 2-piece outfit that allows easy access to the chest area. Please do not apply creams, oils, or powders to the chest area.

About your procedure: Please arrive 20 minutes before your scheduled appointment for preparation. Bring a list of your current medications with you. The test results of your exam will be sent to your physician. The technician cannot discuss results with you.

How to find us: **Free** valet parking is available for patients at the Main Entrance, or you may park in the Bartlett Street Parking Ramp (see map). Cardiology Services will validate your parking stub. When you arrive at Memorial, you must register for your procedure in Admitting, located in the Main Entrance area of the hospital to the rear of the Information Desk (see maps). From there, you will be directed to Cardiology Services. If you have any questions, please ask the Main Entrance Information Desk. If you need any assistance regarding scheduling, please call 647-7700. If you have any questions about how this test is done call 647-3056.

647-7700

Memorial
Hospital of South Bend*
Quality of Life