

SeaCoast Cardiology Consultants, P.L.L.C.

THINGS TO CONSIDER WITH A NEW PATIENT!

YES NO Have you ever seen Dr. Rogers?

If yes: In this office

At another facility

During a hospital stay

In the ER

YES NO Do you know why your doctor is referring you to our clinic?

If yes, Why? Are you having any issues such as: chest pain
 Shortness of breath
 Irregular heart beat
 Dizziness

Who is the doctor referring you? _____

Who is your primary care doctor? _____

YES NO Have you ever been seen by any other cardiologist?

If yes: When? _____

Who? _____

Where? _____

YES NO Do you know when the last time you had lab work done?

Where was the lab work drawn at? _____

Do you know if they checked your cholesterol? _____

Is the doctor that ordered the labs the same doctor who referred you? _____

YES NO Have you had any previous cardiac testing (*relating to your heart*)?

Such as: an EKG
 chest X-ray
 ultrasound of legs
 stress test
 cardiac cath
 echo
 holter monitor

Where were these test(s) performed? _____

What hospitals or other facilities have you been to for cardiac related treatment? Please list all and also include any other offices that may have done labs or EKG's, such as previous primary care doctors.

Please remember you will need to bring all your current medications in the prescription bottles with you to ALL appointments at SeaCoast Cardiology.