



Bulk-Billed Echocardiogram/ECG Only Request Form

SA Paediatrics and Newborns
 25 Payneham Road, College Park, SA, 5069
 Phone: (08) 7081 9819 Fax: (08) 7093 0404
 Email: reception@sapan.health

Patient's Name:	
Address:	
DOB:	Female ☐ Male ☐
Parent's/Guardian's Name:	Phone:
Medicare Number:	
Period of Referral:	
Referral For:	Echocardiogram Only (Bulk Billed) ☐ ECG Only (Bulk-Billed) ☐ Echocardiogram + ECG Only (Bulk-Billed) ☐
Clinical Details:	
Referring Doctor:	
Practice Name and Address:	
Provider Number:	
Signature:	
Date:	

Referrals for Private Consultation +/- Testing to be referred directly to Dr Terry Robertson.