

University | Cardiovascular Center

In affiliation with UCSF Fresno

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Referral Line: 559.825.8467
Fax Referral: 559.540.2957

Direct Referral Line

Fax Referral: 559.540.2957 | Phone: 559.825.8467

Consultation Referral

- | | |
|---|---|
| <input type="checkbox"/> <i>First Available Physician</i> | <input type="checkbox"/> Mouatoua Mouanoutoua, MD |
| <input type="checkbox"/> John Ambrose, MD, FACC | <input type="checkbox"/> Henning Rasmussen, MD |
| <input type="checkbox"/> Teresa Daniele, MD, FACC | <input type="checkbox"/> Ankit Rathod, MD |
| <input type="checkbox"/> Zaher Fanari, MD, FACC, FSCAI, FABVM | <input type="checkbox"/> Brandon Woodbury, MD |
| <input type="checkbox"/> Richard Kiel, MD | |
| <input type="checkbox"/> Siri Kunchakarra MD | |

Testing Referral

Please include testing order

For testing only. Please mark **one**:

- ☐ Carotid Ultrasound
☐ Echocardiogram
☐ Event monitor
☐ Holter Monitor
☐ Nuclear Studies
 ☐ Non-Walking ☐ Walking
☐ Rest/Stress ABI
☐ Stress Echocardiogram
☐ Stress Test/Treadmill
☐ Other _____

Patient Demographics

Patient Name: _____ DOB: _____

Home Phone: _____ Cell Phone: _____

Insurance: _____

Diagnosis (required): _____

Referring Physician: _____

Phone: _____ Fax : _____

PCP (if different from referring): _____

Required Patient Information

- ☐ HMO Referral - ☐ Authorization
☐ Patient Insurance Card and Demographics
☐ Medication List
☐ Most Recent Chart Notes, Lab Results

Appointment Update (UCC Staff Use Only)

Your Patient is Scheduled at: ☐ Clovis ☐ Fresno

Appointment Date: _____ Time: _____ with Dr.: _____