



St Vincent's Hospital – Department of Gastroenterology

Oesophageal Manometry /Ambulatory pH Service Referral

Fax: 9231 3590 Ph: 9231 3580 Email: manometry@svha.org.au

NAME:

DOB:

UR:

Address:

.....

Phone:

Email:

Emergency contact:

Medicare number

Please select test required:

☐

OESOPHAGEAL MANOMETRY

☐

24 HOUR PH IMPEDENCE STUDY

☐

OFF PPI (**preferred**)

☐

OR ON PPI

Reason for referral

☐ Dysphagia

☐ Heartburn

☐ Regurgitation

☐ Atypical chest pain

☐ Consideration for POEM

☐ Consideration for fundoplication

☐ Post fundoplication

☐ Hx of Achalasia

☐ Hx of Motility Disorder

Clinical detail:

Medications prescribed for above hx:

Name: _____ Dose & frequency: _____ Commenced: _____

Latest gastroscopy date and result:

Details of prior gastro-oesophageal surgery:

Referring Consultant details - Referrals from public hospitals - supervising consultant name and provider number must be included

Name:

Address:

Provider number:

Dept:

Phone:

Fax:

Signature and date

PLEASE NOTE 1) Referrals are ONLY accepted from consultant gastroenterologists or general surgeons. Please include the consultants referring provider number to ensure the referral can be processed **2)** For 24-hour pH studies, it is preferred that patients discontinue proton pump inhibitor (PPI) medication at least 5 days before the study. Please provide detailed clinical indications if the study is required while ON PPI therapy. **3)** This oesophageal manometry service is only available to patients with Medicare coverage. **4)** Interpreters are not provided by the hospital. If an interpreter is needed, we kindly ask that a family member or friend be available to assist on the day of the appointment.