Sleep & Respiratory Referral

Sleep, Respiratory Clinic and Testing Suite 44/23 Norton St Leichhardt NSW 2040 Phone. 1300 182 100

www.somahealth.com.au



Please fax referral to **02 8076 3430** or email to **info@somahealth.com.au**One of our staff will contact the patient to book a Bulk-Billed initial appointment.

Consultant Physicians:

Dr Anthony Byrne – Thoracic Physician PhD, MBBS, BAppSc, MIPH, FRACP – English / Español Dr James Di Michiel – Respiratory & Sleep Physician MBBS, B.Sci, BCST, FRACP – English Dr Corinna Pan – Respiratory & Sleep Physician MBBS, BMedSc, FRACP – English / 中文 Dr Xiao Hu – Respiratory & Sleep Physician MBBS, FRACP – English / 中文

Patient Details:	
Surname:	First Name:
D.O.B: / /	Gender: M [] F []
Address:	Phone:
	Mobile:
□ DVA	
Clinical History:	
Services: Consultation, Nasoendoscopy, Pulm Bronchial Provocation Testing, Allergy Testing,	onary Function Testing, FeNO, Rhinomanometry, Inlab and Home Sleep Testing.
Investigation Required (Please Indicate)	
☐ Consultation	□ COPD
☐ Sleep Apnoea Investigation	☐ Asthma
☐ Pulmonary Function Test	☐ Allergy Testing
If possible, please withhold using any puffers/I appointment. May be varied at your referring d	• • • •
Referring Doctor Details (Please Include F	Provider Number)
Please stamp/insert details:	
	Signature:
	Date:
	Thank you for your referral.
	☐ Please tick here to request more referral forms

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Patient Medication Withholding Chart - Asthma Test

The following medication should be withheld prior to taking Aridol™ (mannitol)¹ for an Asthma test.

Withholding Time	Medication
6-8 hours	Inhaled Nonsteroidal Anti-Inflammatory Agents: e.g. sodium cromoglycate (Intal®); nedocromil sodium (Tilade®)
8 hours	Short-Acting Beta 2 Agonists e.g. salbutamol (Ventolin®); terbutaline sulfate (Bricanyl®)
12 hours	Inhaled Corticosteroids e.g. beclomethasone dipropionate (Qvar®); budesonide (Pulmicort®); fluticasone propionate (Flixotide®)
	Anticholinergic Bronchodilators e.g. ipratropium bromide (Atrovent®)
24 hours	Inhaled Corticosteroids and Long-Acting Beta 2 Agonist Combination Products e.g. fluticasone and salmeterol (Seretide®); budesonide and eformoterol (Symbicort®)
	Long-Acting Beta 2 Agonists e.g. salmeterol xinafoate (Serevent®); eformoterol fumarate (Foradile® or Oxis®)
	Phosphodiesterase Inhibitors / Adenosine Receptors e.g. theophylline (Nuelin®)
72 hours	Long Acting Anticholinergics e.g. tiotropium bromide (Spiriva®)
	Antihistamines: Over-the-Counter & Prescription e.g. brompheniramine maleate (Dimetapp®); diphenhydramine (Benadryl®); loratadine (Claratyne®); cetirizine (Zyrtec®); fexofenadine (Telfast®); levocetirizine dihydrochloride (Xyzal®)
4 days	Leukotriene-Receptor Antagonists e.g. montelukast sodium (Singulair®)

Patient Medication Withholding Chart – Allergy Test

Exercise:

48 hours	Short-acting antihistamines e.g. chlorpheniramine (Piriton®); hydroxizine (Ucerax®); acrivastine (Benadryl®)
5 days	Long-acting Antihistamines e.g. loratadine (Claratyne®); desloratadine (Neoclarytin®); cetirizine (Zyrtec®); levocetirizine (Xyzal®); fexofenadine (Telfast®)

Foods: Ingestion of significant quantities of coffee, tea, cola drinks, chocolate or other food containing caffeine may affect test results. These substances should be withheld on the day of the test (prior to testing).1

Vigorous exercise should not be performed prior to testing on the day of the test.1

Smoking: Patients should refrain from smoking for at least 6 hours prior to testing.1

The information contained in this sheet is not designed to replace the advice of your doctor/healthcare professional. Please consult your healthcare professional.

