

Dr Sam Hall
Gastroenterologist

**Fax referral to 08 8371 5840 or
email samhallreception@gmail.com**

*Ashford Specialist Centre
Suite 31, Level 4, 57 Anzac Highway
Ashford SA 5035*

*Tennyson Centre Day Hospital
Glenelg Community Hospital
Seaford Day Surgery
Ashford Hospital*

RAPID ACCESS ENDOSCOPY AND COLONOSCOPY REFERRAL FORM

Patients are to ring our clinic to organise an appointment
Any enquiries phone 08 8371 3000

Consultation

Endoscopy

Colonoscopy

Patient Details

Surname:

Given Name:

Date of Birth:

Sex:

M

F

Address:

Phone: (H)

Phone: (M)

Referring Doctor

Doctor's Name:

Provider Number:

Address:

Phone:

Fax:

Signature:

Clinical Details

Indication:

Significant comorbidities:

Note:

- ✓ Please provide a copy of a health summary if available including medications
 - ✓ Local patients will be seen prior to procedures to give consent and obtain appropriate bowel preparation
 - ✓ Country patients may be managed via phone or Telehealth or seen the day prior to the procedure
 - ✓ There are no out of pocket expenses for insured patients for Proceduralist, Anaesthetist or theatre fees with this service
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