

# Sleep Referral

This referral form is also available electronically. See [www.woolcock.org.au/referral/](http://www.woolcock.org.au/referral/) or contact us for more details.

If you would like to book your patient in for a consultation with one of our specialists, please fax (02) 9114 0010, or fax (02) 9114 0465 to book them in for a sleep study. You can also email your completed referral form to [sleep@woolcock.org.au](mailto:sleep@woolcock.org.au). Our staff will contact your patient with the next available appointment.

**BULK BILLED\* • PRIVATE\*\* • SLEEP UNIT & HOME BASED SLEEP STUDIES**

**REQUIRED:** Full Sleep Study\*\*\* Home Sleep Study Preferred\*\*\* Specialist Consultation

## PATIENT DETAILS:

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Phone No: \_\_\_\_\_

Email Address: \_\_\_\_\_

## CLINICAL NOTES:

\_\_\_\_\_  
\_\_\_\_\_

## CLINICAL SIGNS\SYMPTOMS\HISTORY:

Snoring	BMI > 33kgm <sup>2</sup>	Motor Vehicle Accident
Hypertension	Arrhythmia	Abnormal Activity During Sleep
Insomnia	Restless Legs	Headache
Heart Disease	Diabetes	Depression
Witnessed Apnoeas/Nocturnal Gasping/Choking		Daytime Lethargy/Sleepiness
Neck Circumference > 43cm Male, 39cm Female		

Date: \_\_\_\_\_ Provider No: \_\_\_\_\_ GP Specialist

Referring Doctor: \_\_\_\_\_ Signature: \_\_\_\_\_

Practice Name: \_\_\_\_\_

Phone No: \_\_\_\_\_ Fax No: \_\_\_\_\_

Address: \_\_\_\_\_

Woolcock Sleep and Respiratory Physicians, Ear, Nose and Throat Specialists, Psychologists, Psychiatrists, Neurologists, Dentists, Allergist and Immunologists, Exercise Physiologists, Dieticians and Endocrinologists, Rehabilitation Physicians - a collaborative approach to inter-disciplinary Sleep Health Care established by the NHMRC Centre of Clinical Research Excellence in Sleep Health (CIRUS)

Woolcock Institute of Medical Research ABN 88 002 198 905

## **SLEEP & RESPIRATORY MEDICINE:**

Prof Ron Grunstein (Sleep)  
Prof Greg King (Respiratory)  
Assoc Prof Brendon Yee (Sleep & Respiratory)  
Dr Dev Banerjee (Sleep)  
Dr Peter Buchanan (Sleep & Respiratory)  
Dr Andrew Chan (Sleep & Respiratory)  
Dr Wai Kuen Chow (Respiratory)  
Dr Daniel Judge (Respiratory)  
Dr Roo Killick (Sleep & Respiratory)  
Dr Richard Lee (Sleep & Respiratory)  
Dr Haider Naqvi (Sleep & Respiratory)  
Dr Chetan Pandit (Paediatric Sleep & Respiratory)  
Dr Yasmina Serinel (Sleep & Respiratory)  
Dr Chris Seton (Paediatric Sleep)  
Dr Subash Srikantha (Sleep & Respiratory)  
Dr Andrew Stone (Sleep & Respiratory)  
Dr Katrina Tonga (Sleep & Respiratory)  
Dr Keith Wong (Sleep & Respiratory)  
Dr Sabine Zimmermann (Respiratory)  
Ms Frances Clements (CPAP Coordinator)

## **NEUROLOGY & GERIATRICS:**

Prof Simon Lewis (Neurology)  
Dr Rebekah Ahmed (Neurology)  
Dr Jerome Ip (Neurology & Geriatrics)  
Dr Catriona Ireland (Geriatrics)

## **DENTISTRY:**

Dr Michelle Donegan

## **PLEASE NOTE:**

\* Patients do not require private health insurance. Small gap fee may apply.

\*\*Sleep@woolcock is affiliated with private sleep service providers located within the Sydney Metropolitan area, thereby availing greater choice for patients with private health cover.

\*\*\*Our testing equipment meets Medicare Australia Item 12203 and 12250 specifications. Portable (home based) sleep studies may not be suitable for all patients. Such studies will be undertaken on the discretion of the Respiratory and Sleep Physician authorising the test and according to Medicare Australia guidelines.

## **PSYCHIATRY:**

Dr Chris Blackwell  
Dr Keith Johnson  
Dr Sonia Kumar  
Dr Choong Siew Yong (Paediatric)

## **PSYCHOLOGY:**

Assoc Prof Delwyn Bartlett  
Dr Amanda Gamble (Paediatric)  
Ms Elle Galgut  
Ms Liora Kempler  
Ms Dianne Richards

## **WEIGHT LOSS & ENDOCRINOLOGY:**

Dr Liz Cayanan (Exercise Physiology/Nutrition)  
Dr Kishani Kannagara (Endocrinology/Andrology)

## **REHABILITATION MEDICINE:**

Dr Pearl Chung  
Dr Anuka Parapuram

## **EAR NOSE & THROAT MEDICINE:**

Prof Stuart MacKay  
Assoc Prof Nicholas Stow  
Dr Julia Crawford  
Dr Daniel Novakovic

## **ALLERGY & IMMUNOLOGY:**

Dr John Tan (Paediatric)

## **WOOLCOCK CLINIC**

*Specialising in the diagnosis and treatment of sleep and breathing disorders.*

431 Glebe Point Road, Glebe NSW 2037

T: 02 9114 0000

E: [sleep@woolcock.org.au](mailto:sleep@woolcock.org.au)

F: 02 9114 0010 (Consultation)

F: 02 9114 0465 (Sleep Study)

W: [www.woolcock.org.au](http://www.woolcock.org.au)

## **WOOLCOCK NEUROSLEEP CLINIC**

*Specialising in the diagnosis and treatment of sleep disorders, neurodegenerative and/or mental health problems.*

Level 2, 97 Church Street, Camperdown NSW 2050

T: 02 9114 4121

E: [neurosleep@woolcock.org.au](mailto:neurosleep@woolcock.org.au)

F: 02 9351 0855

W: [www.woolcock.org.au/neurosleep-clinic](http://www.woolcock.org.au/neurosleep-clinic)

# Respiratory Referral

This referral form is also available electronically. See [www.woolcock.org.au/referral/](http://www.woolcock.org.au/referral/) or contact us for more details.

If you would like to book your patient in for a consultation with one of our specialists, please fax (02) 9114 0010, or fax (02) 9114 0465 to book them in for a respiratory function test. You can also email your completed referral form to [breathe@woolcock.org.au](mailto:breathe@woolcock.org.au). Our staff will contact your patient with the next available appointment.

**REQUIRED:**      Respiratory Function Test                      Specialist Consultation

## PATIENT DETAILS:

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Phone No: \_\_\_\_\_

Email Address: \_\_\_\_\_

## CLINICAL NOTES:

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## SMOKING HISTORY:

Never

Ex-Smoker

Current

## TEST REQUIRED:

Full lung function (Spirometry with pre & post bronchodilator / DLCO / Lung Volumes)

Spirometry (pre & post bronchodilator)

MIPs & MEPs (Respiratory Muscle Function Test)

Mannitol Challenge Testing (Provocation Test – Asthma)

Allergy Evaluation (Skin Prick Test)

**Please withhold any puffers on the day of test**

Date: \_\_\_\_\_ Provider No: \_\_\_\_\_ GP      Specialist

Referring Doctor: \_\_\_\_\_ Signature: \_\_\_\_\_

Practice Name: \_\_\_\_\_

Phone No: \_\_\_\_\_ Fax No: \_\_\_\_\_

Address: \_\_\_\_\_

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Dr Daniel Novakovic

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F: 02 9114 0010 (Consultation)  
F: 02 9114 0465 (Respiratory Function Test)  
W: [www.woolcock.org.au](http://www.woolcock.org.au)

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