



SLEEP CARE Solutions

SLEEP STUDY & PFT REQUISITION

Sleep Medicine / Respiriology

- Dr. C. Li, MD, FRCPC, D, ABSM
- Dr. R. Leung, MD, PhD, FRCPC
- Dr. V. Wolski, MD, FRCPC
- DR. N. Vozoris, MD, FRCPC
- Dr. Puja Sahni, MD, FRCPC
- Dr. Anju Anand, MD, FRCPC
- Dr. Anu Tandon, MD, FRCPC
- Dr. P. Rahimi, MD, FRCPC, DABIM
- Dr. Wogane Filate, MD, FRCPC
- Dr. G. Philteos, MD, FRCPC, D, ABSM
- Dr. J. Anthony, MD, FRCPC
- Dr. L. Peress, MD, FRCPC
- Dr. J. Rosenberg, MD, FRCPC
- Dr. M. Huang, MD, FRCPC
- Dr. M. Varkul, MD, FRCPC
- Dr. A. Perl, MD, FRCPC
- Dr. Ying Zhao, MD, FRCPC

Sleep Medicine / Neurology

- Dr. Neal Parekh, MD, FRCPC
- Dr. M. Narayansingh, MD, FRCPC
- Sleep Medicine / E.N.T.
- Dr. H. Guirgis, MD, FRCSC
- Dr. S. Morong, MD, FRCSC

Sleep Medicine / Anesthesiology

- Dr. Mandeep Singh, MD, MS, FRCPC
- Sleep Medicine
- Dr. A. Lowe, MD, FRCPC
- Dr. Purti Papneja, MD, CCFP
- Sleep Medicine / Int. Medicine
- Dr. Monty Sandhu, MD, FRCPC

Respirology

- Dr. Sacha Bhinder, MD, FRCPC
- Dr. D. Casey, MD, FRCPC
- Dr. Navjeet Uppal, MD, FRCPC
- Dr. A. Youn, MD, FRCPC
- Dr. Rebecca Colman, MD, FRCPC
- Dr. Aman Sidhu, MD, FRCPC

PATIENT INFORMATION

Name _____
 Date of Birth _____ M F
 Telephone (H) _____ (w) / (Cell) _____
 Address _____
 Health Card # _____
 Version _____ Exp. Date: _____

REFERRING PHYSICIAN

Name _____
 Billing # _____
 Telephone _____ Fax _____
 Address _____
 Signature _____ Date _____

SLEEP STUDY REQUISITION

TESTS REQUESTED:

- Sleep Study only Consultation Only
- Sleep Study and Consultation
- Previous Sleep Studies Yes No Date(s): _____

Comments: _____

REASON FOR REFERRAL:

- Sleep Apnea Parasomnias (Unusual sleep behaviour)
- Snoring Restless Legs Syndrome
- Insomnia Periodic Limb Movements
- Daytime Sleepiness Frequent Awakening
- Narcolepsy Morning Headaches
- Shift work CPAP Follow-up
- Other, Please Specify: _____

CURRENT MEDICATIONS:

We accept Respirology & PFT Referrals at Downtown, North York & Scarborough locations

- RESPIROLOGY CONSULTATION
Please attach recent blood work, chestX-Rays, CT/MRI reports
- PFT with Consultation PFT only

TESTS REQUESTED:

- Full Pulmonary Function Test
Includes Flow Volume Curve, Diffusion, Lung Volumes, Bronchodilator Spirometry, Oximetry
- Spirometry With bronchodilator if needed

REASON FOR REFERRAL:

PAST MEDICAL HISTORY & RELATED INFORMATION:

- Hypertension Renal Disease Lung Disease
- Heart Disease Chronic Pain Asthma/COPD
- Stroke Seizures Obesity
- Diabetes Mood disorders

Smoker: Y N Ex Smoker: Y N Never Smoke
 # of years Smoked: _____ # of years Quit: _____
 Inhalers _____ time last taken _____
 Latex allergies: Y N Other allergies: _____
 Comments: _____

SPECIAL PATIENT NEEDS:

- Wheelchair Patient Accompanied By Attendant
- Shift Worker Language:
- Oxygen

Additional Comments: _____

Appointment date: _____
 Time: _____
 Received Date: _____
 Approved by: _____
 Cancellation policy notified to the Patient.

LOCATIONS (Please select the location)



123 Edward St., Suite 1011,
 Toronto ON M5G 1 E2
 Tel 416-813-2277

Fax 416-260-3203



Davisville Location

1835 Yonge Street, Suite 303,
 Toronto, ON M4S 1X8
 Tel 416-792-9436

Fax 416-792-9438



5 Fairview Mall Dr., Suite 412,
 North York, ON M2J 2Z1
 Tel 416-299-0400

Fax 416-299-1634



Osler Sleep Clinic

135 Queens Plate Drive, Suite 140,
 Etobicoke, ON M9W 6V1
 Tel 416-231-5770

Fax 416-231-5229



Ellesmere Sleep Disorders Centre

2100 Ellesmere Rd., Suite 326,
 Scarborough, ON M1H 3B7
 Tel 416-439-0130

Fax 416-439-5508



Scarborough Location

2025 Midland Ave., Suite 302,
 Toronto, ON M1P 3E2
 Tel 416-292-3218

Fax 416-292-3200



Toronto Lung Care Clinic

2100 Ellesmere Rd., Suite 328,
 Scarborough, ON M1H 3B7
 Tel 416-439-0130

Fax 416-439-5508



Toronto Lung Care Clinic

1110 Sheppard Ave., Suite 204,
 North York, ON M2K 2W2
 Tel 416-229-2315

Fax 416-223-9828

Please see back for instructions.



Preparation / Instruction for Sleep Studies

Arrival time is between 8:00 pm & 8:15 pm.

Please ARRIVE ON TIME.

WHAT TO BRING: Bring your valid Health Card. Bring this requisition. Bring the list of your current medication. Your comfortable nightclothes like pajamas or nightgown, night slippers. Your own pillow (if you would like) Your reading glasses, book/magazine, your toiletries (toothpaste, toothbrush, shampoo, soap, shaving kit, etc.). If you are currently on CPAP at home, please bring the tube, mask and head gear. **IF THIS IS AN ASSESMENT USING AN ORAL (DENTAL) DEVICE:** bring the device and any adjustment tools with you. You should know how to make adjustments without assistance should it be necessary.

If using a **BODY POSITIONING DEVICE**, bring it with you.

MEDICATION: Follow your daily routine unless instructed otherwise. Bring the list of all your medications along with the doses.

FOOD: Please have your regular evening meal before you arrive for the test. **Avoid alcohol** on the day of the test.

For MSLT/MWT patients: Please bring your own food for the daytime test. We have a fridge and microwave oven for your use in the clinic. No meals or drinks other than water are provided.

RESULTS: Please call our office to book follow-up appointment to review your sleep study report. It will take approximately 3 weeks for the results to reach your doctor. *****WE REQUIRE AT LEAST 3 WORKING DAYS NOTICE IF YOU ARE CANCELLING THE APPOINTMENT*****

****CANCELLATION POLICY:** Please note that there is a no show / cancellation charge **\$150.00** if you do not reschedule or cancel your appointment at least 3 working days in advance.

Preparation / Instruction for Pulmonary Function Tests

Pull PFT: (Flow volume, Lung volume and diffusion) and **Bronchodilator Response Test:**

Stop for 4 hours before test – asthma sprays or puffers.

Stop for 12 hours before test – long-acting bronchodilators such as Serevent or Oxeze. Stop for 24 hours before test – asthma pills such as Singulair or Accolate.

Food:

Do not drink Coffee, Tea, Cola beverages and Chocolate at least 3 hours before test.

Inform the staff if you have active cold symptoms.

DO NOT STOP ANY MEDICATION ON YOUR OWN

If you are unwell and feel you need your medication, take it and inform us.

Contradictions for PFT testing include: Severe aortic stenosis, Recent Pneumothorax, Active TB, Severe or unstable angina, Myocardial infarction less than two weeks, Anginal pain at rest or on exertion not relieved by nitro spray.

Please call 48 hours in advance if you are unable to keep this appointment. If not a cancellation / no show fee of **\$75.00** will apply.

LOCATIONS

Toronto Sleep & Pulmonary Centre

Located at: 123 Edward Street, Suite 1011, Toronto, ON M5G 1E2 conveniently located at one block north and east of major intersection – University Avenue and Dundas Street West. The entrance for the ground parking is off Centre Street. If taking TTC, get off at St. Patrick Station. Walk east to 180 Dundas Street West to enter the building. Upon entering the building call the clinic at

416-813-2277. Shortly thereafter the sleep technologist will greet you.

		College Street		
		Gerrard Street		
		Elm Street		
		Edward Street		
		Toronto Professional Building		
		Dundas Street W		
	University Ave.		Centre St	
			Elizabeth Street	
				Bay Street

Ellesmere Sleep Disorders Centre / Toronto Lung Care Clinic

2100 Ellesmere Road, Suite 326 & 328, Scarborough, ON M1H 3B7 conveniently located at the northwest corner of Markham & Ellesmere Road. The lab is 2 minutes south of HWY 401 or 10 minutes away from Scarborough Town Centre. Major intersection is Markham Road & Ellesmere (North West corner). Enter through back (rear) entrance. Entrance will be open until 9:00 p.m. If you are delayed call

the clinic to notify. Park your car inside the centre courtyard. Parking is free.

		Sheppard Ave.		
		HWY 401		
		Ellesmere Rd.		
		Lawrence Rd. E		
	DVP 404			
		McCowan Rd		
			Markham Rd	
				Neilsen Rd

Davisville Sleep Clinic

Located at: 1835 Yonge Street, Suite 303, Toronto, ON M4S 1X8. Enter through the main entrance. Enter Code at main entrance and wait for the sleep technologist to buzz you in. Public parking is located on Merton Street.

		Eglinton Ave. E.		
		Davisville Ave.		
		Merton St.		
		Yonge St.		
		St. Clair Ave.		
			Mt. Pleasant Rd.	

Scarborough Sleep Clinic

2025 Midland Ave., Suite 302, Toronto, ON M1P 3E2 Door will be open till 9:00 p.m. If you are delayed, keep the clinic number handy to call us. Overnight parking is allowed in the building parking lot and it is free.

		Sheppard Ave. E.		
		HWY 401		
		Ellesmere Rd.		
		Kennedy Rd.		
		Midland Ave.		
			Brimley Rd.	

Osler Sleep Clinic

135 Queens Plate Drive, Suite 140, Etobicoke, ON M9W 6V1. Located at North-East Corner of Rexdale Blvd. and Queens Plate Drive, with close proximity to HWY 27 & HWY 427 North. Enter through Main Entrance. Door will be open till 9:00 p.m. If you are delayed, keep the clinic number handy to call us. Overnight

parking is allowed in the building parking lot and it is free parking.

		Queens Plate Drive		
		Rexdale Blvd		
		409 HWY		
		427 HWY		
		27 HWY		
			Martin Grove Rd.	

Toronto Sleep Clinic

5 Fairview Mall Dr., Suite 412, North York, ON M2J 2Z1. Located at Don Mills Road North of Sheppard Avenue East. Arrive at the Clinic at 8:45 p.m. Sharp and go directly to Suite 412. If you find the building door locked, press 412 on the key pad to your left and the Technologist will open the door. You will not be going directly to bed on arrival as there is paperwork to be

completed and a rather involved set up. There is free parking overnight. **DO NOT PARK IN THE MALL.**

		Esterbrooke Ave.		
		Fairview Mall		
		Subway (TTC)		
		Sheppard Ave. E.		
		401 HWY		
		Don Mills Rd.		
			404 HWY	

Toronto Lung Care Clinic

1110 Sheppard Ave. East, Suite 204, North York, ON M2K 2W2. Located one block west of Sheppard Ave. East and Leslie St. Free Parking.

		Sheppard Ave. E.		
		401 HWY		
		Bayview Avenue		
		Leslie Street		
			Don Mills Rd.	