# Respiratory Services Requisition

www.respiratoryhealthcare.ca

Patient Name

Gender M /F Patient Phone

Date of Birth

Personal Health Number

Address

OR PATIENT LABEL

Referring Physician

Physician Fax

Physician Signature

Comments / Diagnosis

## Pulmonary Consultation

EDMONTON RESPIRATORY CONSULTANTS

**1. Fax completed form to appropriate fax number below**

- ☐ Dr. Warren Ramesh — Fax: 780-702-3885
- ☐ Dr. Humaira Iqbal — Fax: 780-702-3882
- ☐ Dr. Nabil Abduljalil — Fax: 780-702-3885
- ☐ Dr. Ruojin Bu — Fax: 780-665-3566
- ☐ Priority

**Clinical Immunology & Allergy, Allergy Testing**

- ☐ Dr. David Huang — Fax: 780-490-7722

**Education**

☐ Asthma ☐ COPD

**Location** First Edmonton Place Building
**1370 - 10665 Jasper Ave. T5J 3S9**
Tel: 780-702-3866

## Sleep Services

EDMONTON SLEEP INSTITUTE

**1. Fax completed form to the appropriate location**

☐ **Obstructive Sleep Apnea Assessment & Treatment**

**Home Sleep Study (Level III)** interpreted by a Board Certified Specialist/Pulmonologist
**Pulmonary Consult** for an in-lab sleep study (Level 1) if indicated
**CPAP Titration** as recommended
**ABGs** if required
**Pulmonary Function Testing** if required
**Prescription Request for recommended CPAP pressures**

- ☐ **Northgate Mall** — Fax: 780-478-0035 Tel: 780-478-0064, 2086 - 97 St & 137 Avenue T5E 5R8
- ☐ **Southside** — Fax: 587-520-2277 Tel: 587-520-2299, 4636 Calgary Trail T6H 6A1

## Northern Lung Function

## Pulmonary Function Test 2026

**TO BOOK AN APPOINTMENT FOR TESTING**
**PLEASE CALL 780 - 421 - 8495 OR FAX 780 - 467 - 1778**

**Appointment**

Date Time

**Test Required**

☐ **Pulmonary Function**
Spirometry / Flow-Volume Loops (pre and post bronchodilator)
Lung Volumes (Body Plethysmography)
Diffusing Capacity:

☐ **Oximetry**
At Rest and Walking

☐ **Spirometry / Flow-Volume Loops**
Pre and post bronchodilator

| | |
|---|---|
| ☐ **FIRST EDMONTON PLACE (DOWNTOWN)** | #1370, 10665 Jasper Avenue, Edmonton, AB T5J 3S9 |
| ☐ **LONDONDERRY (NORTH EAST)** | 16719 - 71 Street, NW Edmonton, AB T5Z 0Y4 |
| ☐ **MILLWOODS** | Town Centre Professional Building #312, 6203 - 28 Avenue, Edmonton, AB T6L 6K3 |
| ☐ **NORTHGATE MALL** | #2086, 9499 - 137 Avenue, NW Edmonton, AB T5E 5R8 |
| ☐ **SHERWOOD PARK** | Park Place Professional Building #200, 2018 Sherwood Drive, Sherwood Park, AB T8A 5V3 |
| ☐ **SOUTHSIDE** | Huntington Galleria 4636 Calgary Trail Edmonton AB T6H 6A1 |
| ☐ **SPRUCE GROVE** | 102A - 505 Queen Street Spruce Grove AB T7X 2V2 |
| ☐ **ST. ALBERT** | #201 Summit Centre 200 Boudreau Road, St. Albert, AB T8N 6B9 |
| ☐ **WEST END** | Glenwood Health Centre #207, 16028 - 100A Avenue, NW Edmonton, AB T5P 0M1 |
| ☐ **WINDERMERE PLAZA** | 204-5540 Windermere Blvd, NW Edmonton, AB T6W 2Z8 |

☐ Please check box if Beta 2 bronchodilator is contraindicated in this patient

**Patients**

- Please call two working days prior to the test to confirm your appointment
- If your take VENTOLIN or ATROVENT do not take 6 HOURS before your test.
- If you take FLOVENT, ALVESCO, ARNUITY or QVAR, you may take it before your test.
- For all other inhalers, please do not take for 36 HOURS before your test.
- Please do not smoke within 4 HOURS of your appointment.
- Please do not eat large meal within 2 HOURS of your appointment.
- We are Fragrance Free facility. Please don't wear any perfume or colognes on the day of your appointment.