



# SLEEPDOCTORS

TheSleepYouNeed

- Melbourne** - Level 5, 100 Victoria Parade, East Melbourne 3002
- Geelong** - Level 4, 1 Epworth Place, Waurn Ponds 3216
- Shepparton** - 203 Fryers Street, Shepparton 3630

## Referral for Consultation / Sleep Studies

on \_\_\_\_\_ time \_\_\_\_\_  
with \_\_\_\_\_

### Patient Details

Name \_\_\_\_\_ DOB \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
Telephone H \_\_\_\_\_  
W \_\_\_\_\_  
M \_\_\_\_\_

### Clinical Notes

- Snoring
  - Apnoea
  - Restless Legs
  - Insomnia
  - Excessive Sleepiness
  - Unrefreshing Sleep
  - Hypertension
  - Type II Diabetes
  - Cardiac Disease
- \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Signature

\_\_\_\_\_  
Date / /

### Referring Doctor

Name \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
Telephone \_\_\_\_\_ Provider No. \_\_\_\_\_

### Referral Period

- 3 months
- 12 months
- Indefinite