

# Dr. Stanley M. Chan MD FRCSC

Ophthalmologist – Specializing in Cataract Surgery, Corneal Disease and Uveitis

## Doctor's Instruction Sheet

Dear Doctor and Staff:

Please **complete** the following:

- 1) **Physician History and Physical Form** and fax to my office at (780) 735-5242 at least two weeks prior to surgery date.
- 2) The hospital requires **the following tests**:
  - A. An ECG is required for patients with the following risk factors:
    1. History of significant cardiac or respiratory disease
    2. History of peripheral vascular disease
    3. History of hypertension
    4. History of angina
    5. Adult diabetes
    6. History of arrhythmias
    7. History of syncope
    8. Cerebral vascular disease
    9. On digoxin (Lanoxin)
  - B. Coagulation profile if:
    1. Bleeding disorder
    2. On anticoagulants
  - C. Lab work the physician feels is pertinent due to patient co-morbidity; hemoglobin on children **under 12 months** of age.
- 3) Please forward the completed History and Physical Form and any lab work performed to my office. It is required two weeks **BEFORE** the date of surgery.

Thank you for your cooperation.

Sincerely,

Dr. Stanley Chan  
PRACID#: 7832-28108