



**ST VINCENT'S
HOSPITAL**
SYDNEY

A FACILITY OF ST VINCENT'S HEALTH AUSTRALIA

St Vincent's Hospital Sydney Limited
ABN 77 054 038 872

Clinical Genomics

Translational Research Centre
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A/Prof Kathy Wu

MBBS, MMed, FRACP
Clinical Geneticist (HGSA)
Provider Number: 220432CW

Patient details (Label)

URN:

Family Name:

Given Names:

Address:

Phone Number:

Email Address:

Date of Birth:

Sex:

Appointment Requirements:

Medicare Number:

Interpreter required:

Language:

Urgent (reason):

Reasons for referral (eg. to guide current pharmacotherapy; multiple drug reactions)

Current medications (generic names only) – so an advisor report can be generated

History of adverse drug reactions/ medication side effects/ allergies (specify symptoms /reactions):

Please attach relevant investigation reports:

Imaging report

Genetic testing

Histopathology

Muscle biopsy

NCS / EMG

Relevant blood test results

Echocardiogram / Cardiac MRI reports

Other

(Please provide specialist details if registrar)

Referring Doctor:

Department/Specialty:

Provider Number:

Provider Address:

Contact Number:

Signature:

Fax Number:

By:

Date:

Please return completed form via email: svhs.genomics@svha.org.au or Fax 8382 4895.

This referral can be downloaded from our website: www.svhs.org.au/our-services/list-of-services/clinical-genomics