



QUEENSLAND SLEEP

Adult Study Assessment Referral

Adult Sleep/Respiratory Physicians (Partners)

- Dr S Bowler FRACP
- Dr J Binder FRACP
- Dr G Eather FRACP
- Dr W Kelly FRACP
- Dr G Simpson MD FRACP
- Dr S Vincent FRACP

Associates

- Dr L Burr FRACP
- Dr J Churton FRACP
- Dr M Fanning FRACP
- Dr S Leong FRACP
- Dr V Mubarak FRACP
- Dr A Rosenstengel FRACP
- Dr Z Scounos FRACP
- Dr K Semple FRACP

Paediatric Sleep/Respiratory Physicians

- Dr S Burgess PhD FRACP
- Dr S Suresh MRCPCH, FRACP
- Tel 07 3161 0377

Paediatric Hospital Location

Mater Children's Private Brisbane
Raymond Terrace
South Brisbane

Adult Hospital Locations

Tel: 1300 559 116 (All Bookings)

Brisbane South (Head Office)

Mater Private Hospital
293 Vulture St, South Brisbane

Brisbane East

Mater Private Hospital
Weipin Street, Cleveland

Brisbane City

St Andrews War Memorial
North St, Spring Hill

Brisbane North

Holy Spirit Northside
627 Rode Rd, Chermside

Brisbane West

Mater Private Hospital
30 Health Care Dr, Springfield

Cairns

Cairns Private Hospital
1 Upward St, Cairns

Lismore

St Vincent's Private Hospital
20 Dalley St, Lismore

Rockhampton

Mater Private Hospital
Ward St, Rockhampton

Townsville

Mater Private Hospital
Fulham Rd, Townsville

In-Home Study Locations

Brisbane Bundaberg Cairns
Gladstone Hervey Bay Mackay
Maryborough Mt Isa Lismore
Rockhampton Townsville

Name _____

Address _____

_____ DOB _____

Phone _____ Mobile _____

Email _____

Please fax referral to 07 3217 2523

email: sa@qsdu.com.au

Medical Objects: search "sleep" or Provider number SQ41010017D
Qld Sleep will contact your patient with the next available appointment

Clinical Symptoms (please tick relevant boxes)

- | | |
|--|--|
| <input type="checkbox"/> Witnessed Apnoea | <input type="checkbox"/> Diabetes |
| <input type="checkbox"/> Chronic Snoring | <input type="checkbox"/> Hypertension |
| <input type="checkbox"/> Daytime Sleepiness/Lethargy/Fatigue | <input type="checkbox"/> Obesity |
| <input type="checkbox"/> Depressive Symptoms | <input type="checkbox"/> Cardiac Disease |
| <input type="checkbox"/> Abnormal Leg Movements/Behaviour During Sleep | |

Clinical Notes:

Tests Required

- Diagnostic Sleep Investigation
- Nasal CPAP Titration/Re-titration
- Oral Dental Appliance Titration
(Patient must obtain device prior to trial, please contact Qld Sleep)
- Sleep Physician consultation
- Telemedicine Sleep Physician consultation

Sleep Physician Test Requested

(The following tests can only be ordered by a Sleep Physician)

- MSLT
- MWT
- Bi-Level Titration
- ASV Titration

Test Notes

Date: _____

Referring Doctor's Details: _____

Referring Doctor's Signature: _____

Provider Number: _____

www.qsdu.com.au