

Please fax duly completed referral letter to 603-7847 4304 for processing of guarantee letter. For any assistance, please call 24 x 7 Toll Free Helpline at 1 800 88 2678.



MiCare Sdn Bhd (a member of Zueilig Pharma Group)
(formerly known as Metronic iCares Sdn Bhd)



Block A, No. 22 Jalan Astaka U8/84, Section U8, Perindustrian Bukit Jelutong,
40150 Shah Alam, Selangor Darul Ehsan, Malaysia
Tel : +603-7843 9459 Fax : +603-7847 4304, +603-7846 1664
Website: www.micareSvc.com
Email: customerservice@micareSvc.com

REFERRAL LETTER FOR SPECIALIST TREATMENT

Name of patient : Adam Bin Ayob Date of birth : 09-02-1972
 PLEASE TICK Employee Dependent Patient NRIC no. : 720209-05-5367
 Date of consultation : 18-8-2024 Time of consultation : 7.17 pm
 Name of employee : Adam Bin Ayob Employee NRIC no. : 720209-05-5367
 Referred to Hospital : _____
 Name of doctor : _____ Speciality : Emergency Dept.

Reason for referral, PLEASE TICK Outpatient consultation Admission
 Others, please give details: _____

REFERRAL NOTES

Dear Doctor,

Thank you for seeing this pt who we are referring for Syncope Attack for further in.

Sudden episode of Wc, lasting for 10 mins.

Prior fainting, mild giddiness

Post fall: sweating & scalp

BP: 147/93 PR: 106 T: 36.6

SpO2 = 98.2 O2 Sat (r): 8.9

Lungs: clear

CVS: S52

Is the referral related to any of the following?

PLEASE TICK

- Congenital / Hereditary Disorder
- Psychiatric Disorder
- Self inflicted Injury
- STD / AIDS
- Alcohol / Drug Abuse
- Infertility
- Contraception / Sterilisation
- Pregnancy / Childbirth
- Refractive Error of Eye
- Dental Disorder
- Cosmetic Procedure
- Alternative Therapies
- None of the above

LOURDES MEDICAL SERVICES SDN BHD

Reg No. 109120-D
39 Jalan Utas B 15/B, Section 15
40000 Shah Alam, Selangor Darul Ehsan.
Tel: 03-55196446, 03-55196543
Fax: 03-55123136

Diagnosis / Diff. Diagnosis, PLEASE PRINT CLEARLY

Syncope Attack

CONSENT FROM REFERRED PATIENT / GUARDIAN OF PATIENT PRESENT

I hereby give permission to declare the above information to MiCare Sdn Bhd (MiCare).

I understand this documentation is required by MiCare Sdn Bhd (MiCare) to facilitate further medical care for me / my ward / dependent.

Signature & stamp of Referring Doctor

DR. RAJDAVE SINGH
MEDICAL OFFICER
RNRMU, RUSSIA
NO. MMC: 72724

Date: 18/8/24

Signature of patient / guardian

Name (if guardian): _____

NRIC NO.: _____

Date: _____



Hospital Shah Alam
Referral Letter

Patient ID	: SA00722285	Patient Name	: Adam Bin Ayob,
Gender	: Male	Age	: 52Y
Encounter ID	: 123244580001	Encounter Type	: Emergency
Admission Date	: 18/08/2024 22:33	Discharge Date	:
Location	: Emergency	Attending Practitioner	: ED Dr Siti Zakiah Azman
Specialty	: Emergency		

Document Reference No	:	Med/Anc Service	: Emergency
Note Type	: Generic Referral Letter	Performed By	: ED Dr Siti Zakiah Azman
Date/Time	: 19/08/2024 05:19		

Referral Details

Referral To : Panel Clinic
Referral From : ED HSAS
Purpose of Referral :

Thank you for seeing this patient ,

Adam
52 .o /Malay / male
NKMI /NKDA
non smoker

p/w
syncopal attack at 7pm

prior to the fall, he had heavy lifting and tiredness after having strenous activities
he was from bending forward position to standing before he had syncopal attack

no chest pain/SOB/palpitation
no ear pain
no giddiness
no dizziness

No uti sx
no urti sx

oral intake- good
PU- normal

o/e
alert, comfortable
pink, not tachypneic, good pv ,warm peripheries, crt<2s

Blood Presure Systolic 183 mm Hg
Blood Presure Diastolic 105 mm Hg
Respiration 20.00



Hospital Shah Alam
Referral Letter

Patient ID	: SA00722285	Patient Name	: Adam Bin Ayob,
Gender	: Male	Age	: 52Y
Encounter ID	: 123244580001	Encounter Type	: Emergency
Admission Date	: 18/08/2024 22:33	Discharge Date	:
Location	: Emergency	Attending Practitioner	: ED Dr Siti Zakiah Azman
Specialty	: Emergency		

SP02 100.00
Pain Score 1
Temperature 36.00 Celcius
Heart Rate 90.00 bpm
Level Of Consciousness Full Conscious

repeated BP- bp- 166/92
pr- 81

cvs:drnm
lungs: clear, equal ae
p/a: soft, non tender

head position test - negative

ecg stat- sinus rhythm, no ischaemic changes

FBC - wbc - 13.6 hb 13.3 ply 304
Troponin- negative
RP- no AKI
LFT- normal
CXR- clear, no cardiomegaly

My impression was - vasovagal attack

However, in view of his age and high BP on admission, I would like him to do Home BP monitoring and been reviewed at your centre. Kindly do the needful.

Thank you.

Authorized By	: ED Dr Siti Zakiah Azman	Signature	
Last Modified By	: ED Dr Siti Zakiah Azman	Signature	
Print Date / Time	: 19/08/2024 05:20	Logged User	: SITIZAKIAH

DR. SITI ZAKIAH AZMAN
MBBS (MMJ)
MMC: 52525