The Chinese University of Hong Kong - Prince of Wales Hospital Centre for Digestive Health

香港中文大學 - 威爾斯親王醫院 腸胃健康中心

GI Motility Investigation Request Form

Section A Referring doc	ctor	
Referring doctor:		Contact phone no.:
Affiliating institute:		
Section B Patient's information		(Patient's gum label here, if applicable)
Name:		
HKID:		
Age:	Sex: M/F	
Contact Phone no:		
Section C GI Function test		
Diagnosis and indication for test:		
☐ Typical reflux symptoms but poor response to PPI ☐ Atypical symptoms suspicious of GERD		
GERD pre-op assessment		Dysphagia with normal OGD
☐ GERD post-op assessment ☐ Achalasia: post dilatation		
Non-cardiac chest pain but poor response to PPI Achalasia: ?recurrence		
Posterior laryngitis of unknown cause		
Please choose a test:		
a. High Resolution Impedance Manometry only		
b. High Resolution Impedance Manometry & 24-hour esophageal pH monitoring		
c. High Resolution Impedance Manometry & 24-hour esophageal Impedance-pH monitoring		
d. High Resolution Impedance Manometry + 24-hour esophageal pH monitoring + 24-hour pharyngeal pH monitoring		
e. 48-hour Bravo wireless pH monitoring with OGD		
(For test b- e only):		
Stop PPI/H2RA 10 days before test		
Continue PPI/H2RA during test (reason:)		
Not on any PPI / H2RA		
Please give the corresponding instruction form(s) to the patient upon booking.		
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Please call 3505-4316 and fax this request form to 2637-1978 for booking

Address: Centre for Digestive Health, 4M, 4/F, Day Treatment Block, Prince of Wales Hospital, Shatin, N.T., Hong Kong

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