

Cardiac Imaging Request**PATIENT DETAILS**

Name

DOB

M/F

Phone

Address

EXAMINATION**ULTRA LOW DOSE**☐ CT Coronary Angiogram☐ CT Coronary Angiogram + Calcium Score☐ Calcium Score Only**MEDICARE ELIGIBILITY***(for sepcialist referral only)*☐ Medicare eligible scan (Please indicate which criteria met)☐ Non-Medicare eligible scan☐ Stable symptoms consistent with coronary ischaemia, at low intermediate risk of coronary artery disease and would have been considered for angiography☐ Exclusion of coronary artery anomoly or fistula☐ Undergoing non-coronary cardiac surgery☐ Patient has known CAD and meets MBS criteria for invasive angiography☐ Patient has previous CABG and meets MBS criteria for invasive angiography to assess graft patency☐ Newly recognised LV systolic dysfunction of unknown aetiology**MEDICAL HISTORY***(includes previous revascularisation procedures)*☐ Prior Myocardial Infarct☐ Heart Failure☐ Diabetes☐ ECG Findings☐ Prior Coronary Stent☐ Renal Impairment☐ Coronary Bypass Graft☐ Pacemaker**PRECAUTIONS***(please inform us at the time of booking if any of the below boxes are ticked, as the scan may not be possible)*☐ Atrial Fibrillation/ High Grade Ectopy☐ Contraindication to Beta Blockers☐ Impaired Renal Function☐ Pacemaker☐ Weight > 120 kg**RISK FACTORS**☐ Smoker☐ Hypertension**ALLERGIES**☐ Ex-Smoker > 1 year☐ Diabetes☐ Iodine

eGFR:

☐ Hyperlipidaemia☐ Family History☐ Other

Date:

CURRENT MEDICATION☐ Beta Blocker☐ Amiodarone☐ Digoxin☐ CCB

Other:

REFERRING DOCTOR

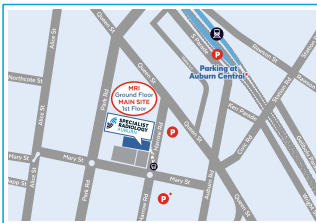
Signature: _____

Date: _____

REPORT

- ☐ Urgent
☐ Phone
☐ Fax
☐ More referral pads

BULK BILLING
For eligible examinations



SPECIALIST RADIOLOGY AUBURN

A: 13 Harrow Road, Auburn 2144 (1st Floor)
 T: 02 8319 8400
 F: 02 9156 1000
 E: auburn@specradgroup.com.au



SPECIALIST RADIOLOGY BLACKTOWN

A: 105 Main Street, Blacktown NSW 2148
 T: 02 8613 6800
 F: 02 8613 6899
 E: info@specradblacktown.com.au



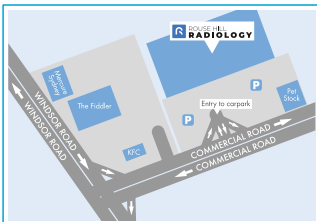
SPECIALIST RADIOLOGY KINGSWOOD

A: Suite G.03 (Ground Floor), Somerset Specialist Building, 38 Somerset St, Kingswood NSW 2747
 T: 02 4713 1600
 F: 02 4713 1699
 E: info@specradkingswood.com.au



SPECIALIST RADIOLOGY ORCHARD HILLS

A: 3/142 Bringelly Rd, Kingswood NSW 2747
 T: 02 8823 1270
 F: 02 8823 1280
 E: info@specradorchardhills.com.au



ROUSE HILL RADIOLOGY

A: T5 / 4-6 Commercial Road, Rouse Hill NSW 2155
 T: 02 8662 1500
 F: 02 8662 1555
 E: info@rhrg.com.au



SPECIALIST RADIOLOGY RHODES

A: Level 8 Suite 802/1 Rider Blvd, Rhodes Waterside Shopping Centre, Rhodes NSW 2138
 T: 02 9051 2020
 F: 02 9055 8100
 E: rhodes@specradgroup.com.au

AUBURN	BLACKTOWN	KINGSWOOD	ORCHARD HILLS	ROUSE HILL	RHODES	SERVICES
●	●	●	—	●	—	MRI
●	●	●	●	●	●	CT ULTRA-LOW DOSE
●	●	●	●	●	●	X-RAY
●	●	●	●	●	●	ULTRASOUND
●	●	●	—	●	—	CARDIAC CT
●	●	●	●	●	●	CALCIUM SCORE
—	—	●	—	●	—	OPG
—	—	●	—	●	—	DEXA
●	●	●	—	●	—	SPINAL/JOINT & MSK INJECTIONS
●	●	●	—	●	—	BIOPSIES /ASPIRATION
●	●	●	●	●	●	MSK ULTRASOUND
●	●	●	●	●	●	DOPPLER/ VASCULAR ULTRASOUND
●	●	●	●	●	●	OBSTETRIC ULTRASOUND



Specialist Radiology Group accepts ALL valid referrals.
 Your doctor has recommended you to us for your medical imaging service.
 You may choose another provider but please discuss this with your doctor first.