Request form / Referral

| | D .1: | |
|---------|--------------|------|
| ils | Date: | |
| Details | Name: | DOB: |
| Patient | Address: | |
| ä | Medicare No: | |
| | | |

Diagnostic Request. Reason for referral and clinical history



For all appointments Ph: 4046 7800 4051 3028 Fax: Email: cairns@qldxray.com.au

Phone lines open from: 7am-9pm Mon to Fri 8am-4pm Sat & Sun

Additional Patient Information

Known renal Impairment

Previous contrast reaction Public Hospital Outpatient

Diabetic Melanoma

PET/CT Medicare rebateable studies are below. Please tick which items apply. All PET referrals are to be sent to petctcairns@qldxray.com.au

Indication Diagnose □ Stage

Other

- - Monitor

🗆 Restage

🗆 RT Planning Clinical Trial

PET/CT All PETCT scans include relevant diagnostic CT \Box opt out, low dose CTAC only

| □ Histopathology | | |
|--|--|---|
| Lung | Head & Neck | Sarcoma |
| □ 61523 Solitary Pulmomary Nodule - Diagnosis | 61598 Staging | 61640 Bone or Soft Tissue Sarcoma - Staging |
| G1529 NSCLC - Staging | 61604 Restaging | 61646 Sarcoma - Restaging |
| Brain | 61610 Metastatic SCC unknown primary - Staging | Gastrointestinal |
| 🗆 61538 Brain - Restaging | Breast | 61541 Colorectal - Restaging |
| 61559 Epilepsy - Evaluation | 61524 PET Breast - Stage III, Staging | 61577 Oesophageal/GOJ - Staging |
| 🗆 61560 Alzheimer's - Diagnosis | 61525 PET Breast - Restaging | □ 61647 Gastroenteropancreatic NET - |
| Lymphoma | Melanoma | Diagnosis - DOTA Peptide PET |
| □ 61620 Staging | 61553 Restaging | Prostate |
| □ 61622 First Line Surveillance - during treatment | Granden | 61563 PSMA Intermediate to high-risk, staging |
| □ 61632 Second Line Surveillance | Gynaecology | 61564 PSMA Restaging |
| | 61565 Ovarian - Restaging | |

Follow-up appointment with Referring Doctor:

| | Practitioner's Name: | | |
|-----------|----------------------|-------------------------------------|-----|
| S | Address: | Queensland X-ray Internal Use Only | |
| etails | Address: | Medical Imaging Final Check | Yes |
| S D | | Pregnant | |
| eΓ | | Front Office Check | |
| titione | | Patient Identification verified | |
| t; | | Procedure and consent verified | |
| La C | | Correct side and site verified | |
| e P | | Correct patient data and side marke | ers |
| Ē | Signature: | Tech initials: | |
| Referring | | Team leader signature: | |
| ž | Copy to: | | |

61575 Uterine Cervix - Restaging

Thank you for referring your patient to Queensland X-ray.

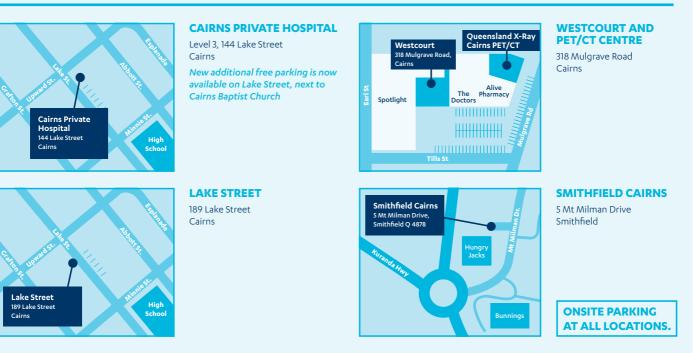
Yes No



MEDICARE CRITERIA Whole body FDG PET study, performed for evaluation of a solitary pulmonary nodule where the lesion is considered unsuitable for transthoracic fine needle aspiration biopsy, or for which an attempt at pathological characterisation has failed (R). 61523 while body PDG PET study, performed for the staging of locally advanced (Stage III) breast cancer, for a patient who is considered suitable for active therapy (R) (Anaes.) Whole body FDG PET study, performed for the staging of locally advanced (Stage III) breast cancer, for a patient who is considered suitable for active therapy (R) (Anaes.) Whole body FDG PET study, performed for the staging of proven non-small cell lung cancer, where curative surgery or radiotherapy is planned (R). FDG PET study of the brain for evaluation of suspected residual or recurrent malignant brain tumour based on anatomical imaging findings, after definitive therapy (or during ongoing chemotherapy) in patients who are considered suitable for active therapy (R). Whole body FDG PET study, performed for the evaluation of suspected residual, metastatic or recurrent colorectal carcinoma in patients considered suitable for active therapy (R). Whole body FDG PET study, following initial therapy, for the evaluation of suspected residual, metastatic or recurrent malignant melanoma in patients considered suitable for active therapy (R). FDG PET study of the brain, performed for the evaluation of suspected residual, metastatic or recurrent malignant melanoma in patients considered suitable for active therapy (R). FDG PET study of the brain, performed for the evaluation of suspected metastatic or recurrent malignant melanoma in patients considered suitable for active therapy (R). FDG PET study of the brain, performed for the evaluation of the subave with the results of an SUGP experiment malignant melanoma in patients considered suitable for active therapy (R). FDG PET study of the brain, performed for the evaluation of the study with the results of an FDC PET study of a normal brain from a reference database; and (c) a service to which this item applies has not been performed on the patient in the previous 12 months; 61524 61525 61529 61538 61541 61553 61559 61560 61563 Whole body PSMA PET study performed for the restaging of recurrent prostate adenocarcinoma, for a patient who has undergone prior locoregional therapy and is considered suitable for further locoregional therapy to determine appropriate therapeutic pathways and timing of treatment initiation. Whole body FDG PET study, following initial therapy, performed for the evaluation of suspected residual, metastatic or recurrent ovarian carcinoma in patients considered suitable for active therapeutic. 61564 61565 Whole body FDG PET study, following initial therapy, performed for the evaluation of suspected residual, metastatic or recurrent ovarian carcinoma in patients considered suitable for active therapy (R). Whole body FDG PET study, for the further primary staging of patients with histologically proven carcinoma of the uterine cervix, at FIGO stage IB2 or greater by conventional staging, prior to planned radical radiation therapy or combined modality therapy with curative intent (R). Whole body FDG PET study, for the further staging of patients with confirmed local recurrence of carcinoma of the uterine cervix considered suitable for salvage pelvic chemoradiotherapy or pelvic exenteration with curative intent (R). Whole body FDG PET study, performed for the staging of proven oesophageal or GEJ carcinoma, in patients considered suitable for active therapy (R). Whole body FDG PET study performed for the staging of biopsy-proven newly diagnosed or recurrent head and neck cancer (R). Whole body FDG PET study performed for the evaluation of patients with suspected residual head and neck cancer after definitive treatment, and who are suitable for active therapy (R). Whole body FDG PET study performed for the output of most active therapy (R). 61571 61575 61577 61598 61604 61610 Whole body FDG PET study performed for the evaluation of metastatic squamous cell carcinoma of unknown primary site involving cervical nodes (R). 61620 Whole body FDG PET study for the initial staging of newly diagnosed or previously untreated Hodgkin or non-Hodgkin lymphoma (R). Whole body FDG PET study to assess response to first line therapy either during treatment or within three months of completing definitive first line treatment for Hodgkin or non-Hodgkin 61622 lymphoma (R). whole body FDG PET study for restaging following confirmation of recurrence of Hodgkin or non-Hodgkin lymphoma (R) 61628 Whole body FDG PET study tor restaging tollowing confirmation of recurrence of Hodgkin or non-Hodgkin lymphoma (R). Whole body FDG PET study to assess response to second-line chemotherapy if haemopoietic stem cell transplantation is being considered for Hodgkin or non-Hodgkin lymphoma (R). Whole body FDG PET study for initial staging of patients with biopsy-proven bone or soft tissue sarcoma (excluding gastrointestinal stromal tumour) considered by conventional staging to be potentially curable (R). Whole body FDG PET study for initial staging of patients with suspected residual or recurrent sarcoma (excluding gastrointestinal stromal tumour) after the initial course of definitive therapy to determine suitability for subsequent therapy with curative intent (R). Whole body 68Ga DOTA peptide PET study, if (a) a gastro entero pancreatic neuroendocrine tumour is suspected on the basis of biochemical evidence with negative or equivocal conventional imaging; or (b) both; (i) a surgically amenable gastro entero pancreatic neuroendocrine tumour has been identified on the basis of conventional techniques; and(ii) the study is for excluding additional disease sites (R). 61632 61640 61646 61647

QUEENSLAND X-RAY LOCATIONS

For all appointments Ph: 4046 7800 Fax: 4051 3028 Email: cairns@qldxray.com.au



Access your images and results online. Let our friendly reception staff know you'd like to register for the Patient Portal. For more information, please visit qldxray.com.au/patients/results-portal/

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ted on Supreme Laser which has the following



Your doctor has recommended you use Queensland X-ray. You may choose another provider but please discuss this with your doctor first