

Patient Details

Date

Name:

DOB:

Address:

Medicare No:

Drs Peter Storey
Phelim Doyle
Michael Curley
Nishani Atapattu
Priya Harish
Roger Mitchell

Diagnostic Request

Reason for referral and clinical history

Follow-up appointment with Referring Doctor:

Referring Practitioner's Details

Practitioner's Name:

Address:

Signature: _____

Copy to: _____

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

Internal Use Only

	Yes	No
Pregnant	<input type="checkbox"/>	<input type="checkbox"/>
Front Office Check	<input type="checkbox"/>	<input type="checkbox"/>
Patient Identification verified	<input type="checkbox"/>	<input type="checkbox"/>
Procedure and consent verified	<input type="checkbox"/>	<input type="checkbox"/>
Correct side and site verified	<input type="checkbox"/>	<input type="checkbox"/>

Correct patient data and side markers Tech initials: _____

Team leader signature: _____

My Appointment

Date: _____

Time: _____

Location: _____

Other: _____

For more information about your examination please visit qldxray.com.au

OPEN WEEKENDS	X-RAY	EOS IMAGING	OPG	SCREENING – IVPs, BARIUM STUDIES	CT SCAN	ULTRASOUND	DUPLEX ULTRASOUND	ECHOCARDIOGRAPHY	MAMMOGRAPHY	NUCLEAR MEDICINE	BONE DENSITOMETRY	MRI	PET/CT
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TOOWOOMBA AND DARLING DOWNS LOCATIONS

Location	Ph:	Fax:	Email:	OPEN WEEKENDS	X-RAY	EOS IMAGING	OPG	SCREENING – IVPs, BARIUM STUDIES	CT SCAN	ULTRASOUND	DUPLEX ULTRASOUND	ECHOCARDIOGRAPHY	MAMMOGRAPHY	NUCLEAR MEDICINE	BONE DENSITOMETRY	MRI	PET/CT
HIGHFIELDS 73 Highfields Road, Highfields					•				•	•	•						
MEDICI MEDICAL CENTRE Ground Floor, 13-15 Scott Street, Toowoomba	Ph: 1300 770 151	1300 023 191	toowoomba@qldxray.com.au		•	•			•								
RUSSELL STREET 127 Russell Street, Toowoomba					•		•		•	•	•	•	•		•		
ST ANDREW'S HOSPITAL 280 North Street, Toowoomba					•			•	•	•	•		•	•		•	•
ST VINCENT'S HOSPITAL Entrance 6, Ground floor, Herries St, East Toowoomba				Sat AM	•		•	•	•	•	•			•		•	
WARWICK 51 Wood Street, Warwick	Ph: 4660 2800	4661 1849	warwick@qldxray.com.au		•		•		•	•	•						

AFTER HOURS PLEASE CALL – (07) 4659 4500.

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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