Request form / Referral

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



Patient Details	Date:		Drs Alan Boles
	Name:	DOB:	Peter Brookfield Tyson Reeve
		506.	Charlotte Slaney
	Address:		Alister Darveniza
	Medicare No:		Dougal Brown Solokara Karunarathne
	Serum Creatinine Level:	eFGR:	Sam Smith
Die	anastis Paswast		Centralised Appointments
Dia	gnostic Request		and Enquiries Ph: (07) 4759 2800
			Fax: (07) 4775 6460
			Email: Townsville@qldxray.com.au
Reas			Mater Private Hospital – Pimlico
			Mercy Centre, 25 Fulham Road
			(Via Diprose St), Pimlico
			Mater Private Hospital – Hyde Park
			9-13 Bayswater Road, Hyde Park
			Domain Central
			Shop 21A Building I 103 Duckworth Street, Garbutt
	son for referral and clinical history		Douglas – Discovery Rise
			Ground Floor, Clinical Practice
			Building, James Cook Drive, Douglas
			Fairfield
			Homemaker Centre Shop 9,1 Darcy Drive, Idalia
			North Queensland Cowboys
			Stadium NEW LOCATION
			Hutchinson Builders Centre
			Level 2, 26 Graham Murray Place
			Railway Estate, Townsville
			North Shore 7/50 North Shore Boulevard,
			Burdell
Fall	ow-up appointment with Referring Doctor:		
FOII	ow-up appointment with Referring Doctor.		
	Practitioner's Name:		
eferring Practitioner's Details	Address:		
			Internal Use Only Yes No
			Pregnant
			Front Office Check Patient Identification verified
ring			Procedure and consent verified
efer	Signature:		Correct side and site verified Correct patient data and side markers
~			correct patient data and side markers

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Tech initials:

Team leader signature:



_		PLEASE NOTE: Bookings are required for all examinations except for plain x-rays.																
ae u	Date: Time:		OPEN WEEKENDS			ETRY		CT CARDIAC ANGIOGRAPHY		ULTRASOUND	DUPLEX ULTRASOUND	÷				RY		_
	ocation:					LATERAL CEPHALOMETRY	ργ	ANGIO				ECHOCARDIOGRAPHY		MAMMOGRAPHY	NUCLEAR MEDICINE	BONE DENSITOMETRY		
Ä	Other:			PLAIN X-RAY		AL CEP	SOSCC	RDIAC	Z		X ULT	CARDI			EAR M	DENS		
	For more information about your examination please visit qu		OPEN	PLAIN	OPG	LATER	FLUOROSCOPY	CTCA	CT SCAN	ULTRA	DUPLE	ECHO	EOS	MAM	NUCLI	BONE	MRI	PET/CT
HOSPITA	L BASED PRACTICES (FOR COMPLEX AND INTERVENTIC	NAL PROCEDURES)																
MATER PRIVATE HOSPITAL – PIMLICO Mercy Centre, 25 Fulham Road (Via Diprose St), Pimlico		_	Sat 9am – 4pm Sun 9am – 1pm	•	•	•	•	•	•	•	•			3D*	•		•	
MATER PRIVATE HOSPITAL – HYDE PARK Ground Floor, 9-13 Bayswater Road, Hyde Park				•			•		•	•	•	•			•	•	•	•
сомми	NITY PRACTICE																	
DOMAIN CENTRAL Shop 21A Building I, Domain Central, 103 Duckworth Street, Garbutt		Ph: 4759 2800 Fax: 4775 6460 Email: Townsville@ qldxray.com.au		•	•	•			•	•	•						•	
DOUGLAS – DISCOVERY RISE Ground Floor, Clinical Practice Building, James Cook Drive, Douglas				•					•	•			•	3D			•	
FAIRFIELD Homemaker Centre , Shop 9, 1 Darcy Drive, Idalia				•					•	•	•							
NORTH QUEENSLAND COWBOYS STADIUM NEW LOCATION Hutchinson Builders Centre, Level 2, 26 Graham Murray Place, Railway Estate, Townsville				•					•	•	•						•	
NORTH SHORE 7/50 North Shore Boulevard, Burdell		•		•					•	•	•							

FOR AFTER HOURS EMERGENCY IMAGING, PLEASE CONTACT 4759 2800.

Access your images and results online. For more information, please visit qldxray.com.au/patients/online-access-patient-portal

DOWNLOAD THE QXR PATIENT APP





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