NLCSP CT Request form / Referral

QueenslandXRay

Patient Details

Date: DOB:

Name: Medicare No:

Address: WorkCover Claim No:

For bookings scan here

qldxray.com.au/book-online

Or please call

Brisbane	1300 781 926
Gold Coast	1300 183 988
Mackay	4965 6200
Townsville	4759 2800
Cairns	4046 7800
Toowoomba	1300 770 151

I confirm the patient is eligible to participate in the National Lung Cancer Screening Program (NLCSP)

Please tick:

☐ **57410 Low-dose CT scan of chest for NLCSP – Initial or 2 Year Re-Scan**

☐ Family history of lung cancer in a first-degree relative (includes parents, siblings or children)

☐ **57413 Low-dose CT scan of chest for NLCSP – Interval or Follow-up**

☐ **Any previous Chest CT** **Date and Provider (if known):** _____

☐ **Additional clinical notes:**

Referring Practitioner's Details

Practitioner's Name:

Address:

Provider No: _____

Signature: _____

Copy to: _____

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

Internal Use Only

	Yes	No
Pregnant	☐	☐
Front office check	☐	
Patient identification verified	☐	
Procedure and consent verified	☐	
Correct side and site verified	☐	

Correct patient data and side markers

Tech initials: _____

Team leader signature: _____

QueenslandXRay

For bookings scan here

qldxray.com.au/book-online

My Appointment

Date:

Time:

Location:

Other:

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

Scan here to see full list of practice locations and services

BRISBANE PRACTICES Ph: 1300 781 926 or Email: bookings@qldxray.com.au	
GREENSLOPES PRIVATE HOSPITAL	Ph: 3421 0444
MATER PRIVATE HOSPITAL BRISBANE	Ph: 3840 6200
MATER HOSPITAL BRISBANE	Ph: 3212 9000
MATER PRIVATE HOSPITAL SPRINGFIELD	Ph: 3470 3000
QUEEN ELIZABETH II JUBILEE HOSPITAL	Ph: 3712 2500
ST VINCENT'S PRIVATE HOSPITAL BRISBANE	Ph: 3227 0000
SUNNYBANK PRIVATE HOSPITAL	Ph: 3347 2700
BAYSIDE (OPPOSITE REDLAND HOSPITAL)	Ph: 3488 5600
BEENLEIGH	Ph: 3382 4944
BOWEN HILLS	Ph: 3024 4600
BROWNS PLAINS	Ph: 3802 7605
CAPALABA	Ph: 3906 4700
CLEVELAND	Ph: 3826 6700
COORPAROO	Ph: 3456 3100
LOGANHOLME	Ph: 3380 7599
LOGAN CENTRAL	Ph: 3387 4888
LOGAN ROAD (GREENSLOPES)	Ph: 3394 5800
MOUNT GRAVATT	Ph: 3347 0400
SUNNYBANK MARKET SQUARE	Ph: 3722 8300
TARINGA	Ph: 3721 5300
WYNNUM	Ph: 3900 4300
GOLD COAST PRACTICES Ph: 1300 183 988 or Email: gcbookings@qldxray.com.au	
GOLD COAST PRIVATE HOSPITAL	Ph: 5552 5700
HELENSVALE	Ph: 5563 5200
BROADBEACH	Ph: 5562 9000
SOUTHPORT	Ph: 5581 0900
AIRPORT CENTRAL	Ph: 5513 3700

MACKAY PRACTICES Ph: 4965 6200 or Email: mackay@qldxray.com.au	
MATER PRIVATE HOSPITAL	Ph: 4965 6200
FOURWAYS	
NORTHERN BEACHES	
TOWNSVILLE PRACTICES Ph: 4759 2800 or Email: townsville@qldxray.com.au	
MATER PRIVATE HOSPITAL – PIMLICO	Ph: 4759 2800
MATER PRIVATE HOSPITAL – HYDE PARK	
DOMAIN CENTRAL	
DOUGLAS – DISCOVERY RISE	
FAIRFIELD	
NORTH QUEENSLAND COWBOYS STADIUM NEW LOCATION	
NORTH SHORE	
CAIRNS PRACTICES Ph: 4046 7800 or Email: cairns@qldxray.com.au	
CAIRNS PRIVATE HOSPITAL (LEVEL 3)	Ph: 4046 7800
LAKE STREET	
SMITHFIELD CAIRNS	
WESTCOURT	
TOOWOOMBA PRACTICES Ph: 1300 770 151 or Email: toowoomba@qldxray.com.au	
HIGHFIELDS	Ph: 1300 770 151
MEDICI MEDICAL CENTRE	
RUSSELL STREET	
SOUTH TOOWOOMBA	
ST ANDREW'S HOSPITAL	
ST VINCENT'S HOSPITAL	
WARWICK	Ph: 4660 2800 warwick@ qldxray.com.au

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

DOWNLOAD THE QXR PATIENT APP

Download on the App Store

GET IT ON Google Play

Queensland X-Ray stores your images for FIVE years. Visit us for all your medical imaging and create a complete and highly secure five-year electronic radiology record which your doctor can access 24/7.

Printed on Supreme Laser which has the following environmental credentials:

PEFC EMS ECF

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