## NLCSP CT Request form / Referral



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Patie	Address:	WorkCover Claim No:



## 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

or visit our website qldxray.com.au

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
57413	Low-dose CT scan of chest for NLCSP - Follow-up

	Practitioner's Name:
Referring Practitioner's Details	Address:
Practi	Provider No:
Referring I	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	
Film preference verified	
Correct patient data and side ma	arkers
Tech initials:	
Team leader signature:	

qldxray.com.au





벋	Date:
My Appointment	Time:
Арро	Location:
Ā	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@g	ldyray com au
GREENSLOPES PRIVATE HOSPITAL	Ph: 3421 0444
MATER PRIVATE HOSPITAL BRISBANE	Ph: 3421 0444
	Ph: 3212 9000
MATER HOSPITAL BRISBANE	
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
MATER WOMEN'S IMAGING CENTRE	Ph: 3840 6208
SUNNYBANK WOMEN'S IMAGING CENTRE	Ph: 3347 2755
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 NEW LOCATION	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@d	qldxray.com.au
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HELENSVALE	Ph: 5563 5200
BROADBEACH NEW LOCATION	Ph: 5562 9000
SOUTHPORT	Ph: 5581 0900
AIRPORT CENTRAL	Ph: 5513 3700

MACKAY PRACTICES Ph: 4965 6200 or Email: mackay@qld	xray.com.au	
MATER PRIVATE HOSPITAL		
FOURWAYS	Ph: 4965 6200	
NORTHERN BEACHES	-	
TOWNSVILLE PRACTICES Ph: 4759 2800 or Email: townsville@q		
MATER PRIVATE HOSPITAL – PIMLICO		
MATER PRIVATE HOSPITAL – HYDE PARK		
DOMAIN CENTRAL	-	
DOUGLAS - DISCOVERY RISE	Ph: 4759 2800	
FAIRFIELD	_ PN: 4759 2800 _	
NORTH QUEENSLAND COWBOYS STADIUM  NEW LOCATION		
NORTH SHORE	-	
CAIRNS PRACTICES Ph: 4046 7800 or Email: cairns@qld:	xray.com.au	
CAIRNS PRIVATE HOSPITAL (LEVEL 3)		
LAKE STREET	Ph. 4044 7000	
SMITHFIELD CAIRNS	Ph: 4046 7800	
WESTCOURT		
TOOWOOMBA PRACTICE Ph: 1300 770 151 or Email: toowoomba@		
HIGHFIELDS		
MEDICI MEDICAL CENTRE	— — Ph: 1300 770 151	
RUSSELL STREET		
SOUTH TOOWOOMBA		
ST ANDREW'S HOSPITAL	-	
ST VINCENT'S HOSPITAL		
WARWICK	Ph: 4660 2800 warwick@ qldxray.com.au	

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