



xplore radiology

**Narellan**  
30 Queen Street  
Narellan NSW 2567  
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**Emerald Hills**  
5 Emerald Hills Boulevard  
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Ph: (02) 8073 7834  
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**Camden**  
37 John Street  
Camden NSW 2570  
Ph: (02) 4610 4029  
Fax: (02) 4610 8441

**PATIENT DETAILS**

Name: \_\_\_\_\_ D.O.B: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Medicare Number: \_\_\_\_\_

Examination Region: \_\_\_\_\_

**CLINICAL NOTES**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**EXAM REQUIRED**

- CT Scan
- X-Ray
- FNAB (>1cm)
- CT Cholangiogram
- Mammogram +/- Ultrasound
- Joint Injection
- CT Angiogram
- Venous Doppler
- Work Cover
- Ultrasound
- Breast Core Biospy (>1cm)

Possibility of Pregnancy?  Yes  No  Unsure

IF PATIENT REQUIRING IV CONTRAST, RECENT CREATININE LEVEL & eGRF:

\_\_\_\_\_  
\_\_\_\_\_

DATE OF RENAL FUNCTION: \_\_\_\_\_

Please send images/reports electronically  Please send more referrals

**COPIES TO:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**REFERRING DOCTOR**

Name: \_\_\_\_\_ Specialty: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Provider No: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# PREPARATION FOR PATIENTS

## ULTRASOUND

**PELVIC & PREGNANCY:** You may eat normally. Drink 1 litre (5-6 glasses) of water beginning 1.5 hours prior to appointment finishing within 30 minutes and **DO NOT** go to the toilet. You **MUST** have a full bladder at the time of your appointment. **DO NOT** go to the toilet again.

**URINARY TRACT & PROSTATE:** Nothing to eat 2 hours before appointment. Drink 1 litre (5-6 glasses) of water beginning 1.5 hours prior to your appointment within the next 30 minutes and **DO NOT** go to the toilet. You **MUST** have a full bladder at the time of your appointment. **DO NOT** go to the toilet again.

**ABDOMEN & ABDOMINAL ARTERIES/DOPPLER:** Nothing to eat or drink 8 hours before your appointment.

**RENAL ARTERIES/DOPPLER:** Nothing to eat 12 hours prior to your appointment. You need to be hydrated. Drink 1-2 glasses of water before your appointment.

**DVT/LEG DOPPLER:** You need to be hydrated. Drink 750mls of water 1 hour before your appointment. You may empty your bladder as necessary.

## CT SCANS

**HEAD, SOFT TISSUES OF THE NECK, CHEST, ABDOMEN AND PELVIS:** Nothing to eat 3 hours prior to your appointment.

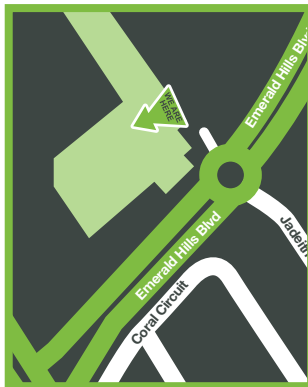
**SPINE AND EXTREMITIES:** No preparation required.

**ANGIOGRAM:** Nothing to eat 4 hours prior to your appointment. Patient should advise if any allergies to Iodine.

**CHOLANGIOGRAM:** Nothing to eat 6 hours prior to your appointment. Patient should advise if any allergies to Iodine.



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