



# Radiology Referral

Form G1

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

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

DOB: \_\_\_\_\_ Gender: \_\_\_\_\_ Phone: \_\_\_\_\_

Medicare No: \_\_\_\_\_ Do not send reports to My Health Record

X-Ray  CT  Ultrasound  MRI  Echo  Nuclear Medicine  BMD  Mammography

PATIENT DETAILS

EXAMINATION

NOTES

REFERRING DR

### Medicare Specific Clinical Indications Please tick if applicable

#### Ultrasound

##### Shoulder Ultrasound

- Evaluation of injury to tendon, muscle or muscle/tendon junction
- Rotator cuff tear/calcification/tendinosis (biceps, subscapular, supraspinatus, infraspinatus); or biceps subluxation
- Capsulitis and bursitis
- Evaluation of mass including ganglion
- Occult fracture
- Acromioclavicular joint pathology

##### Knee Ultrasound

- Abnormality of tendons or bursae
- Meniscal cyst, popliteal fossa cyst, mass
- Nerve entrapment or tumour
- Injury of collateral ligaments

#### MRI - GP Referred

##### Patients 16 years and older

Additional codes available for <16yrs

##### MRI Head

- Unexplained seizures
- Chronic headache with suspected intracranial pathology

##### MRI Knee - Under 50yrs

- Acute meniscal tear
- Acute anterior cruciate ligament tear

##### MRI Cervical Spine

- Trauma
- Radiculopathy

#### Transthoracic Echocardiogram (TTE)

##### GP and Specialist Referred

- Initial study for investigation (once per 2 years)
- Serial study for investigation
  - (i) isolated pericardial effusion or pericarditis; or
  - (ii) Baseline study and has commenced medication for non-cardiac purposes with cardiotoxic side effects.

##### Additional imaging (MM3-6 GP only)

- Serial study for known valvular dysfunction

#### Appointments

1300 648 958

imagingqueensland.com.au

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

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

Provider number: \_\_\_\_\_

Copies to: \_\_\_\_\_

Urgent Ph: \_\_\_\_\_

Allergies \_\_\_\_\_

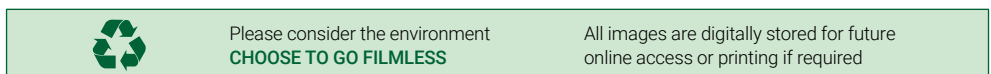
Signature

Date

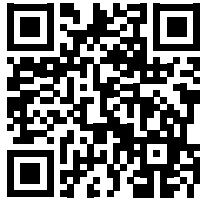
#### Medical Imaging Final Check

MIT initials: \_\_\_\_\_

- 3 Patient identification check verified
- Correct side & site verified
- Procedure & consent verified
- Pregnancy excluded



## ① How to book?



Follow 2 simple steps to get a call back

1. Scan the QR code
2. Upload a photo of referral front page.

**Done!** We will contact you shortly.

Please send through your referral prior to making an appointment

OR

# 1300 648 958

[iqbookings@imagingqueensland.com.au](mailto:iqbookings@imagingqueensland.com.au)

[imagingqueensland.com.au/booking](http://imagingqueensland.com.au/booking)

## ② Your appointment

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

Preparation: \_\_\_\_\_

Appointment time: \_\_\_\_\_

Please arrive 15 minutes prior to your appointment time

For preparation instructions please refer to [imagingqueensland.com.au](http://imagingqueensland.com.au)

## ③ What's important?

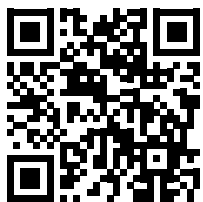
### General X-Ray | OPG

No appointment needed.  
All Medicare eligible X-Rays are Bulk Billed.

### Ultrasound | Nuclear Medicine MRI | CT | Mammography Bone Densitometry | Dental Interventional Procedures

Please make an appointment.  
Preparation may be required prior to examination. Fees may apply.

For more information on our clinics, scan the QR code below



## ④ Where to go?

|   | BMD                   | Cardiac Imaging       | CT Scan               | Dental                | Gastroesophageal Reflux | Interventional        | Mammography           | MRI                   | Nuclear Medicine      | Ultrasound            | X-Ray                 |
|---|-----------------------|-----------------------|-----------------------|-----------------------|-------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <b>Brisbane</b><br>Level 2, 141 Queen Street, Brisbane City 4000      | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>   | <input type="radio"/> |                       | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| <b>Deception Bay</b><br>Market Square, Bay Avenue, Deception Bay 4508 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |                         | <input type="radio"/> |                       |                       |                       | <input type="radio"/> | <input type="radio"/> |
| <b>Margate</b><br>287 Oxley Avenue, Margate 4019                      | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>   | <input type="radio"/> | <input type="radio"/> |                       | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |