Direct Radiology
Focused on care

CLEAR FORM

REQUEST FOR DIAGNOSTIC IMAGING

APPOINTMENT TIME:

DATE: **TIME:**

Name: Date of Birth:

Address:

Telephone:

REFERRAL/REQUEST(S) FOR:

- ☐ OPG
- ☐ XRAY
- ☐ ULTRASOUND
- ☐ DOPPLER
- ☐ PROCEDURE
- ☐ MAMMOGRAPHY
- ☐ DEXA
- ☐ CT
- ☐ MRI

CT Scanning

If Diabetic, does treatment contain Metformin ☐ YES ☐ NO

What is renal function? _____

Date of last Renal Function Test _____

Patient Sex ☐ MALE ☐ FEMALE Is the patient pregnant? ☐ YES ☐ NO

EXAMINATION & CLINICAL DETAILS:

PATIENT CATEGORY:
- ☐ PRIVATE
- ☐ VET/AFF
- ☐ TAC
- ☐ W/C
- ☐ PENSION

RESULTS:
- ☐ Telephone Report
- ☐ Images + report return with patient
- ☐ Fax Report
- ☐ Electronic Report

All reports will be emailed with immediate web access to images

COPIES TO:

DATE:

REFERRING DOCTORS DETAILS:

DOCTOR'S SIGNATURE: PROVIDER NUMBER: EMAIL:

MRI SAFETY SURVEY

Please indicate with a tick:	YES	NO
Cardiac Pacemaker (or wires)	◯	◯
Heart valve / Coronary stent	◯	◯
Aneurysm Clip	◯	◯
Cochlear / Stapes implant	◯	◯
VP shunt	◯	◯
Neurostimulator	◯	◯
Breast Tissue Expander	◯	◯
Insulin Infusion Pump	◯	◯
Other Metallic Foreign Body	◯	◯
Metallic Foreign Body in Eye	◯	◯
(If not removed = orbit X-ray)		

If 'YES" to ANY above, please provide make, model and any supporting documentation.

INSTRUCTIONS TO PATIENT:

ABDOMINAL ULTRASOUND: Please do not eat or drink for 6 hours prior to the test.
OBSTETRIC AND PELVIC ULTRASOUND: Drink 5 glasses of water 1 hour before your appointment and do not empty your bladder.
CT SCAN: No food or drink for 4 hours prior to the test (with contrast).
MRI: Please inform us if you have a pacemaker or other metal implants in your body.

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www.directradiology.com.au

Practice	Address	Suburb	Phone	Fax	X-Ray	Ultrasound	Women's Ultrasound	Obstetric Ultrasound	Vascular Ultrasound	Sports/Musculoskeletal Imaging	Low Dose CT	Mammography	Bone Densitometry	OPG (Dental X-Ray)	Interventional Procedures	3T MRI
Fairfield	Level 1, 149 Station Street	Fairfield	9489 8884	9489 8887	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Bayside	280 Coventry Street	Sth Melbourne	8617 0226	8617 0229	✓	✓	✓	✓	✓	✓	✓		✓	✓	✓	
Yarra Ranges	66 Main Road	Monbulk	9756 7605	9756 7675	✓	✓	✓	✓	✓	✓					✓	

Services Provided

Your Doctor has recommended that you use Direct Radiology . You may choose another provider but please discuss with your doctor.

Re-order forms available via www.directradiology.com.au