









Why choose Central Queensland Radiology?

-  You will be cared for by our experienced and highly qualified healthcare team.
-  We will ensure you feel comfortable and at ease throughout the whole imaging process.
-  Our practices have modern facilities with state of the art imaging equipment that uses the latest technology.
-  Fast and accurate reports to your referring Doctor so you can access your results promptly.
-  Medicare will rebate this examination in certain medical conditions and our friendly staff can discuss with you when you make the booking.
-  Easy on-site parking.
-  Assistance with bookings and follow up appointments.

BUDERIM
12-14 King Street,
Buderim QLD 4556

BLIBLI
Bli Bli Village Centre, 310 David
Low Way, Bli Bli Qld 4560

MAROOCHYDORE
60 Wises Road,
Maroochydore QLD 4558

NAMBOUR
Nambour Central, Main entry via
Ann St, Nambour QLD 4560

SCUPH
3 Doherty Street,
Birtinya QLD 4575

SELANGOR PRIVATE
62 Nethernton Street,
Nambour QLD 4560

WARANA
1 Main Drive,
Warana QLD 4575



Book an Appointment

 1300 697 226

 (07) 5428 4899

 bookings@scradiology.com.au

 scradiology.com.au

Bulk Billing
*Medicare eligible services

Cardiac Imaging



CT Cardiac Imaging

Latest technology available offering:

- The GE Discovery CT 750 HD offers the highest available cardiac spatial resolution in the industry at 18.2 p/cm .
- Designed to deliver up to 50% lower dose.
- Multiplanar and 3D images are produced to highlight the coronary vessels and heart. This enables evaluation of the coronary tree and possible anomalies, coronary artery disease (atherosclerosis) assessment of bypass grafts/ stents, and functional abnormalities.

How the examination is performed:

- Administration of beta blockers to ensure the heart rate is slow and regular, the patient is catheterised for an IV contrast injection. The scan is performed with ECG gating to ensure the images are obtained with minimal movement of the heart and lowest possible radiation dose.
- The images are processed using the latest iterative reconstruction technology from GE which maintains image quality, whilst allowing the images to be obtained at significantly lower doses.

Patient's suitable for this examination include:

- Patient's with symptoms consistent with possible cardiac ischemia.
- Regular heart rate or in slow AF
- Assessment of bypass grafts
- As part of surgical work up for cardiac valve replacement.



Echocardiography

An echocardiogram, or an 'echo' is a common procedure undertaken for cardiac imaging. It uses ultrasound (sound waves) to produce an image of your heart. No radiation is involved. Your heart muscle, valves, large blood vessels and blood flow can be assessed in great detail.

Echocardiography provides your doctor with information about the blood pressure within the chambers of the heart and lungs. Echocardiography is not dangerous and does not involve radiation or X-rays. You should not feel pain or discomfort.

A technician will place small metal disks called electrodes on your chest. These electrodes have wires which attach to the ultrasound machine. This machine monitors your heart rhythm during the test. To image the heart, the technician will press firmly as he or she moves the transducer across your chest and will ask you to briefly hold your breath during the test. For most of the test, you will be required to lie still.

An echocardiogram may take up to 45 minutes to perform.

Nuclear Medicine Cardiology

In Australia one of the leading causes of death is Coronary artery disease (CAD). A Myocardial Perfusion scan (MPS) can provide essential diagnostic and prognostic information.

Myocardial Perfusion Scans have a higher sensitivity of 89% and specificity of 75%, than Exercise Stress Tests (67% and 70% respectively).

An MPS can be useful if your patient presents with atypical chest pain, suspected stable angina, or for assessing blood flow after myocardial infarction, bypass surgery, angioplasty or stents.

MPS can also be used for assessing fitness for work or surgery. A negative study has an excellent negative predictive value for significant coronary events and is of most value in the intermediate risk patient.

MPS scans provide a physiological assessment of perfusion whereas Coronary Angiography or CTCA provides anatomical and non-quantitative coronary artery assessment.