SUNSHINE COAST RADIOLOGY

PET-CT Imaging Referral

PATIENT DETAILS

Name: _____

Address: _____

DOB: _____ Gender: _____ Phone: _____

Medicare No: _____ ☐ Do not send reports to My Health Record

CLINICAL HISTORY

Primary Site: _____ Histopathology: _____

DETAILS:

NOTES

EXAMINATION — *Please select a CT option with a tick. This is a Medicare requirement.*

☐ **PET with Diagnostic CT**
(Includes Head, Neck, Chest, Abdo, Pelvis, Thighs + Contrast, unless otherwise stated)

☐ PET without Diagnostic CT
(Includes localisation CT only, Vertex to Thigh)

INDICATIONS FOR MEDICARE ELIGIBLE PET *(Rebates only apply when referred by a **Specialist**. Other indications do not attract a Medicare rebate)*

GA - 68

☐ PSMA *(Initial staging)*	61563
☐ PSMA *(Restaging)*	61564
☐ PSMA *(assess eligibility for Lutetium-177 PSMA therapy)*	61528

FDG

☐ Solitary Pulmonary Nodule	61523
☐ Breast *(Staging, locally advanced Stage III)*	61524
☐ Breast *(Suspected metastatic or recurrent)*	61525
☐ Non Small Cell Lung *(Staging of proven)*	61529
☐ Brain Tumour *(Malignant, suspected residual, recurrent)*	61538
☐ Brain *(Performed for diagnosis of Alzheimer's Disease)*	61560
☐ Colorectal Carcinoma *(Suspected residual metastatic, recurrent)*	61541
☐ Melanoma *(Suspected residual/recurrent, following initial therapy)*	61553
☐ Refractory Epilepsy	61559
☐ Ovarian *(Suspected residual, metastatic, recurrent)*	61565
☐ Uterine/Cervical *(Staging, FIGO stage 182 or greater)*	61571
☐ Uterine/Cervical *(Recurrent)*	61575
☐ Oesophageal/GOJ *(Performed for the staging of proven oesophageal or GEI carcinoma)*	61577
☐ Head & Neck *(Initial staging, recurrent)*	61598
☐ Head & Neck *(Residual)*	61604
☐ SCC *(Metastatic, unknown primary inv cervical nodes)*	61610
☐ Rare/Uncommon Cancer *(Initial staging)*	61612
☐ Rare/Uncommon Cancer *(Response/restaging)*	61614
☐ Lymphoma *(HL&NHL) (Initial staging) HL*	61620
☐ Lymphoma *(HL&NHL) (Response)*	61622
☐ Lymphoma *(HL&NHL) (Restaging recurrent)*	61628
☐ Lymphoma *(HL&NHL) (Prior to stem cell transplant)*	61632
☐ Bone/Soft Tissue Sarcoma *(Initial staging, excludes GIST)*	61640
☐ Bone/Soft Tissue Sarcoma *(Residual, recurrent, excludes GIST)*	61646

EXAMINATION

NON MEDICARE ELIGIBLE PET *(Incurs out of pocket fee)*

☐ FDG ☐ OTHER Details: _____

Name: _____

Provider number: _____

Address: _____

Copies to: _____

☐ Urgent Ph: _____ ☐ Allergies _____

Signature

Date

REFERRING DR

Appointments

1300 697 226

scradiology.com.au

SUN 443834 PET CT Referral Form A4

Medical Imaging Final Check

MIT initials: _____

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

HDAA CERTIFIED ISO 9001

Please consider the environment
CHOOSE TO GO FILMLESS

All images are digitally stored for future online access or printing if required

Excellence in Diagnostics

Patient Information

PET-CT Imaging Referral Form

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.

OR

1300 697 226

bookings@scradiology.com.au

scradiology.com.au/booking

Please send through your referral prior to making an appointment

② Your appointment

Date: _____

Appointment time: _____

Please arrive 15 minutes prior to your appointment time

Preparation:

For preparation instructions please refer to scradiology.com.au

③ What's important?

On the Day of your Scan

Please allow 2-2.5 hours for your appointment.

When you arrive, you will be asked to change into a gown and asked about your medical history. A small plastic needle will be placed into a vein in your arm or hand. Depending on the type of scan, your blood sugar will be measured.

You will then receive an injection of a small amount of radioactive tracer. Depending on your examination, you will be required to rest quietly for 45-60 minutes in your own room in a comfortable recliner chair. You will not be able to have a family member or friend remain with you; staff will be present to monitor your needs.

After emptying your bladder, you will be asked to lie still on a scanning table for 15-30 mins. Upon completion, you will be asked to remain in the department for 15 minutes. You may then leave.

During your exam you may be given contrast for the CT scan. Please inform us if you have an allergy or are pregnant or breastfeeding.

If you require sedation for your scan (claustrophobia), you will not be able to drive for 12 hours.

Scan Preparation

FDG Scan

☐ Fast 6 hours prior to your appointment. No food, chewing gum, lollies or vitamins. (Diabetic patient's see additional instructions). Drink as much plain water as you like and use the toilet as needed. No strenuous exercise for at least 12 hours prior to appointment. Please remove metallic jewellery prior to your appointment. If you have non-diabetic medications, take them at your usual times with plain water.

Diabetic Patients for FDG Scan

☐ Non-Insulin Dependant
If your appointment is before 12pm (noon), fast from midnight and DO NOT have breakfast or your oral diabetic medication. If your appointment is after 12pm (noon), have your normal breakfast with your oral diabetic medication, and then fast for 6 hours until your appointment.

☐ Insulin Dependant
Your appointment should be mid-morning. Eat a normal breakfast along with your normal insulin dose. Then fast for 4 hours prior to your appointment. You cannot take insulin for 4 hours before your appointment. Contact us on 07 5455 8955 if you are concerned about your blood sugar levels on the day or if you have an insulin pump. Bring your insulin and some food with you on the day.

☐ PSMA Scan
Fast 4 hours prior to your appointment. Drink 1 litre of water, 1 hour prior to your appointment and use the toilet as needed. If you have medications, take them at your usual times with plain water.

④ Where to go? PET-CT Imaging only available at our Noosa clinic

Noosa Civic Medihub, 28 Eenie Creek Rd, Noosaville 4566

P 5455 8955 F 5455 8990

Open Monday to Friday, 8am - 5pm

Services also available at Noosa

General X-Ray | Ultrasound | MRI | CT | PET-CT | Interventional Procedures

For more information on our 13 clinics across Sunshine Coast, scan the QR code

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