

PATIENT DETAILS

First Name Last Name D.O.B.
 Address
 Mobile Tel
 Medicare Position on card M F

EXAMINATION REQUIRED

X-RAY Medicare rebates apply to a maximum of 2 spine regions on a single day

CERVICAL

- AP / lateral / open mouth
 - obliques
 - flexion/extension

THORACIC

- AP / lateral

LUMBO-PELVIC

- AP / lateral incl. pelvis & both hips
 - obliques
 - flexion/extension
- Sacrum Coccyx

HIPS

- R Hip L Hip

OTHER REGIONS

- eg. knee, foot, wrist (please specify)

MRI No Medicare rebates apply.

MRI scans only available at Booragoon.

- Cervical Thoracic Lumbar
- Other Region (please specify)

MSK ULTRASOUND

- Please specify region

DEXA No Medicare rebates apply.

*Body Composition scans only available at Booragoon.
 Bone Densitometry available at Booragoon and Forrestfield.*

- Bone Densitometry
- Body Composition

CLINICAL HISTORY

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REFERRER

Referrer's Signature: Date:

Image Distribution
 Online
 Hard copy to Patient

Report Distribution
 Online
 Fax

Copy to:

PLEASE SEE OVERLEAF FOR CLINIC LOCATIONS

DOCTOR SIGNATURE:

DATE:

The consulting radiologist, in exercising due care and skill, may conduct a patient consultation as deemed necessary. The radiologist will engage with the referrer to consider any further diagnostic requirements that may result from the consultation.



Radiologists: Radiologists: Dr. Riet D'Hauwe, Dr. Victor Wang, Dr. Mark Hamlin, Dr. Yuranga Weerakkody, Dr. Paul Drury, Dr. Jacqueline Dalton, Dr. Sanjeeb Sarma, Dr Jonathan Waner, Dr Matt Brooks.

| OFFICE USE ONLY | IDENTIFICATION VERIFICATION | CLERICAL | MIT |
|-----------------|------------------------------------|----------|-----|
| | Patient identification verified | Y | Y |
| | Procedure verified & consented | Y | Y |
| | Correct site and side verified | Y | Y |
| | Correct patient data and labelling | Y | Y |
| | Staff member Initials | | |

**No appointment needed for General X-Rays or Dental X-Rays
Appointments required for Full Spine X Ray**

We aim to treat our patients with empathy and understanding and our referrers with respect and professional courtesy. We want to show leadership in embracing advances in technology and techniques and always put our patients first.

| LOCATIONS | OPENING HOURS | MRI | Mammogram | General X-Ray | Low Dose CT | Ultrasound | Doppler | Nuchal Translucency | Interventional Radiology | Cardiac Screening | FNA & Biopsy | Dental X-Ray (OPG/LAT CEPH) | Bone Densitometry |
|---|---|-----|-----------|---------------|-------------|------------|---------|---------------------|--------------------------|-------------------|--------------|-----------------------------|-------------------|
| BOORAGOON Suite 9/135 Riseley St, Booragoon WA 6154 Ph: 08 9364 7858 F: 08 9364 6236 E: booragoonadmin@capitalradiology.com.au | Mon-Fri: 9:00am - 5:00pm Sat: By appointment | ✓ | | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | | | ✓ | ✓ |
| BUSSELTON Unit 3, 11-13 Bussell Hwy, Busselton WA 6280 Ph: 08 9754 4730 F: 08 9754 6832 E: busseltonadmin@capitalradiology.com.au | Mon-Fri: 8:30am - 5:00pm Sat: By appointment | | | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | | ✓ | | |
| CLAREMONT 345 Stirling Hwy, Claremont WA 6010 Ph: 08 9284 6900 F: 08 9284 2955 E: claremontadmin@capitalradiology.com.au | Mon-Fri: 8:30am - 5:00pm | | | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | | ✓ |
| EATON Unit 1, 2 Albatross Cres, Eaton WA 6232 Ph: 08 9725 2109 F: 08 9725 2152 E: eatonadmin@capitalradiology.com.au | Mon-Fri: 8:30am - 5:00pm | | | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | | ✓ | ✓ | |
| FORRESTFIELD Unit 1, 82 Hale Rd, Forrestfield WA 6058 Ph: 08 9359 3456 F: 08 6454 3866 E: forrestfieldadmin@capitalradiology.com.au | Mon-Fri: 9:00am - 5:00pm | | | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | | ✓ | ✓ | |
| FREMANTLE Unit 112, 1 Silas Street, East Fremantle WA 6158 Ph: 08 6244 3344 F: 08 6244 3346 E: fremantleadmin@capitalradiology.com.au | Mon-Fri: 9:00am - 5:00pm | | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | | ✓ |
| *NEW MORLEY Suite 6/312 Walter Road West, Morley WA 6062 Ph: 08 6296 6375 F: 08 9315 7996 E: morleyadmin@capitalradiology.com.au | Mon-Fri: 9:00am - 5:00pm | | | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| QUINNS Unit 1, 10 Mindarie Dr, Quinns Rocks WA 6030 Ph: 08 9305 8606 F: 08 9305 8609 E: quinnsadmin@capitalradiology.com.au | Mon-Fri: 9:00am - 5:00pm | | | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | | ✓ | ✓ | |

For referrers only: To request referral pads, please complete the form at: <https://www.capitalradiology.com.au/request-referral-pads>

Your referrer has recommended you use Capital Radiology clinics. You may choose another provider but please discuss with your doctor first.

CAPITAL RADIOLOGY IS YOUR PARTNER IN IMAGING.

Use the QR code to request an appointment or to find your closest Capital Radiology location.

Visit [capitalradiology.com.au](https://www.capitalradiology.com.au) for more information.

