

### Parramatta:

Ground Floor 50 O'Connell St Parramatta NSW 2150 Ph: 9683 5333

Fax: 9683 5111

### **Fairfield Heights:**

247 The Boulevarde Fairfield Heights NSW 2165 Ph: 9609 5115

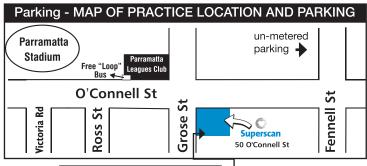
Fax: 9604 2545

BOOK APPOINTMENTS ONLINE AT A	www.superscan.com.au
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Patient Details	Name, DO	B & Addres	s are manda	atory)
Name		[	D.O.B /	
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Clinical Informat	ion			
BOOK APPOINTMENTS ONLINE AT SUPERSCAN.COM.AU				
☐ Hard copies requir	ed	$\square$ Send mor	e referral pa	nds
cc Report to:				
<b>Doctors Details</b>				
Doctor's Signature			_ Date	

X-R	ay		
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	Doppler		
	Fibroscan		
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	KUB/Renal		
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Ш			
Dua	al Source CT		
Щ	СТ		
Ц	CT Angiography		
닏	CT Coronary Angiography	_	
닏	CT DIEP angiography	Ц	CT Dentascan
닏	CT Colonography	Ш	CT Cholangiogram
Ш	CT Arthrogram		
Du	al Energy Functional CT		
Ш	CT Coronary Angiography with Pe	rfusi	on
	Renal stone characterisation		
	Pulmonary angiogram with lung	perf	usion
	Gout scan for uric acid crystals		
Nu	clear Medicine +/- SPECT/CT		
	Myocardial perfusion scan		Gated heart pool scan
Ш	Bone scan		
Щ	Renal scan		Thyroid scan
Ц	HIDA scan		Gallium scan
닏	V/Q scan		Red cell scan
닏	GIT transit study		Parathyroid scan
Щ	Other	_	, 
Ш	<b>DEXA</b> - Bone Mineral Densitometry (12306, 12312, 12315, 12321, 12323)	Ш	DEXA - Whole Body
MR	II (Wide Bore)		Composition
П	MRI		
For	GPs		
	ts 16 and over Rebate available		
	Head		Knee
	C spine		PIP Implant
Child	dren under 16 Rebate available	_	
Ц	Head	닏	Wrist
님	Spine	님	Hip
Ш.	Elbow	Ш	Knee
For	Specialists Rebate available	_	
닏	Prostate	닏	Crohn's
닏	Breast	닏	Rectal Ca
Ш	PIP Implant	Ш	Cervical Ca

# **Parramatta**

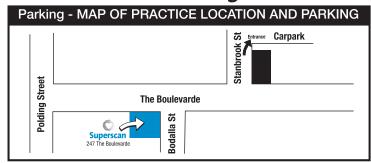




#### Parramatta

Ground Floor 50 O'Connell St Ph: 9683 5333 Fax: 9683 5111

# Fairfield Heights



# Plenty of street parking



#### Fairfield Heights

247 The Boulevarde Ph: 9609 5115 Fax: 9604 2545

### IF YOU'VE HAD PREVIOUS IMAGING ELSEWHERE, PLEASE BRING IMAGES TO YOUR APPOINTMENT

Preparation for scans

#### **ULTRASOUND**

#### **Ultrasound Abdomen**

Nothing to eat, drink, smoke or chew gum for 8 hours before test. Under 6yrs old, no prep required.

# Ultrasound - Renal Kidneys and Bladder, Obstetric and Pelvic.

Empty bladder 1.5 hours before appointment and then drink 1 litre of water in the next 30min. A full bladder is required for this study. Under 6yrs old, 2 glasses 30 minutes before ultrasound

#### **CT DUAL SOURCE**

#### **CT Spine and Extremities**

No preparation required

# CT Angiography, CT Coronary Angiography, CT Chest, Brain, Neck, Abdomen and Pelvis

Fast for 3 hours prior to appointment time. It's beneficial to drink 1 glass of water every hour whilst fasting

#### **DEXA**

Please call if a recent bone scan or barium study has been performed.

#### Diabetic

Please notify staff for appropriate arrangements. Monitor your diabetes carefully for 24 hours if you have received a contrast injection.

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#### **Myocardial Perfusion Scan**

No caffeine (eg. Coffee, tea, chocolate and coca cola) 24 hours prior to study.

Exercise patients to wear comfortable clothes. Fast from midnight.

# Parathyroid Scan, Gallium Scan Bone Scan, Lymphoscintigraphy No preparation

#### **Thyroid Scan**

No preparation required. Avoid Iodine contrast agent prior to study.

# **Captopril DTPA**

Call for advice

#### **DMSA/DTPA Renal Scan**

Well hydrated. If adult drink 500ml of water in 2 hours before the test.

### **MRI (Wide Bore)**

Please call for appointment and instructions

Appointment time:	Date:	
Appointment ume	Date,	_

Whilst you are entitled to take this request form to another imaging provider, it would be advisable to respect your doctor's wishes and have your scan performed at Superscan. This will ensure you get scanned on new top of the line equipment and experience an outstanding service.