



Patient Information

Name: _____ DOB: _____ Sex at Birth: _____
Address: _____ Telephone: _____ Gender Identity: _____
Medicare No: _____ Pronouns: _____

Imaging Request

☐ X-ray/OPG ☐ Nuclear Medicine
☐ CT ☐ Ultrasound
☐ Fluoroscopy ☐ Interventional
☐ Cone Beam CT ☐ Dexa/BMD
☐ Other: _____

Examination/Procedure Required

☐ Pre procedure diagnostic ultrasound if required.

Reason for Request & Clinical Question

Medical and Surgical History

Technologist Use Only:

Patient Name ☐ Patient address ☐ Patient DOB ☐ Patient Consent ☐ Pregnancy status confirmed ☐ Technologist Initials _____

Referring Doctor

Name: _____ Practice Name: _____
Address: _____
Provider No: _____ Fax: _____
Telephone: _____ Signature: _____ Date: _____
Urgent Result Contact No: _____ Copy To: _____

Safety

Contrast Allergy No ☐ Yes ☐ Renal Compromised No ☐ Yes ☐
Diabetic/Metformin No ☐ Yes ☐ Anticoagulant No ☐ Yes _____
Pregnant No ☐ Yes ☐ eGFR _____ Date: _____

☐ Do not send to My Health Record ☐ Do not bill to Medicare

Your doctor has recommended that you use St Vincent Private Radiology. You may choose another provider but please discuss with your doctor first.

Ph: 03 9231 1000 Fax: 03 9231 1005 Email: svpr@svha.org.au | Hours: Mon-Fri 7:30am-6:00pm Sat: 800am-12:00pm
55 Victoria Parade, Building B, Basement Level, Fitzroy VIC 3065

Special Instructions

Pelvic Ultrasound, 1st Trimester Pregnancy:

Empty bladder 1 hour prior and sip on 600mls of water in the hour prior to your appointment.

US Abdominal (Gallbladder & Gallstones):

Fast for 6 hours prior and drink clear liquids only (water, herbal tea without milk).
Other ultrasound appointments have no special preparation.

CT Colonography, Cholangiogram & Gastroscopy:

4-6 hour fast prior to your scan, continue to drink water as normal.

CT Coronary Angiogram:

Do not consume caffeine 24 hours prior (including soft drink, tea, coffee, chocolate),
fast from food 4 hours prior, no smoking morning of your test.

Nuclear Medicine Scans:

Many of these scans are performed in 2 parts, over a 5 hour period.
Detailed instructions will be provided to you at the time of booking.

Interventional Procedures:

Refer to appointment letter or email for specific instructions.
You will need an INR blood test if you are on blood thinners.

MRI:

Arrive 30 minutes prior to your appointment to complete a safety questionnaire. Some scans require
an earlier arrival time and extra preparation, this will be advised at the time of booking.

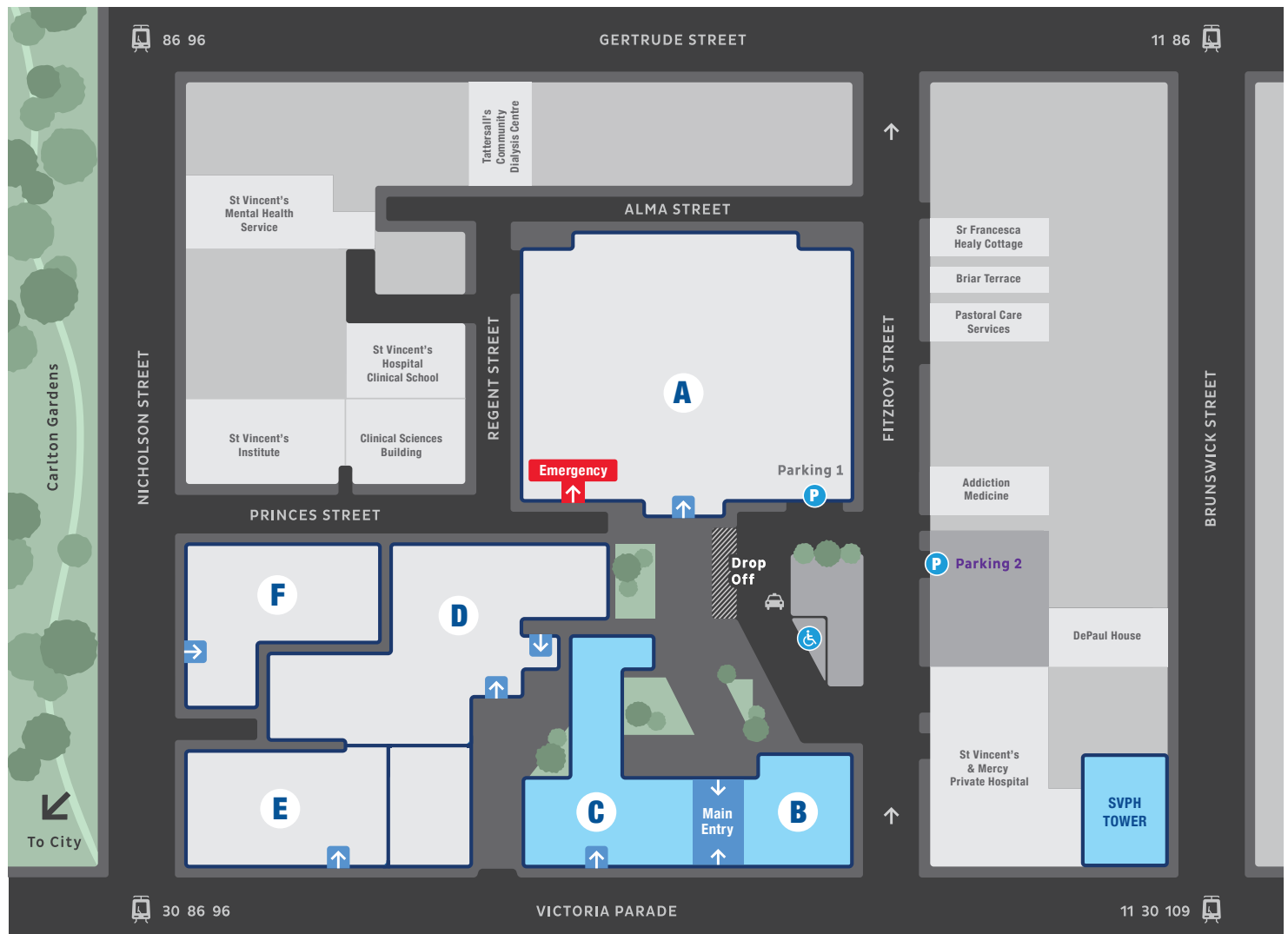
**If you are over 65, diabetic, renal impaired or on blood thinning medication (excluding Aspirin),
you may require a blood test prior to your CT, MRI or Interventional appointment.*

Please advise reception when booking.

- CT Coronary Angiogram
- CT/Cone Beam
- Nuclear Medicine
- PET/CT
- Interventional Radiology
- Ultrasound
- Colour Doppler Ultrasound
- General X-ray
- OPG
- Fluoroscopy
- Bone Mineral Densitometry
- MRI

FREE PARKING for Patients Attending St Vincent's Private Radiology

Please park in 'Parking 2'
and bring your ticket to
SVPR reception for validation.



Building D
Daly Wing
35 Victoria Pde
Specialists Clinics
General Xray

Building A
Main Hospital
41 Victoria Pde
Medical Imaging
Day Procedures

Building C
Healy Wing
41 Victoria Pde
MRI Centre
Heart Centre

Building B
55 Victoria Pde
Private Radiology
Pathology
Pharmacy

SVPH Tower
Private Imaging
Ground Floor