



# Imaging Request

Regional



## I-MED Radiology Network

Comprehensive care. Uncompromising quality.

PLEASE BRING PREVIOUS FILMS FOR COMPARISON

NAME:

DATE:

DETAILS:

MEDICARE NO:

WORKERS COMPENSATION

Patient

Exam

Clinical Notes

Referring Doctor

Dr M Young  
Dr M Gupta

Armidale: (02) 6772 2349

### IV Contrast Alert

If patient requiring IV contrast, recent creatinine level / eGFR:

Date of renal function test:

### Obstetric Ultrasound:

Previous Uterine surgery / Instrumentation: Yes / No

Number: \_\_\_\_\_

Date LMP: \_\_\_\_\_

REFERRER DETAILS:

PROVIDER NO:

SIGNATURE \_\_\_\_\_ DATE:

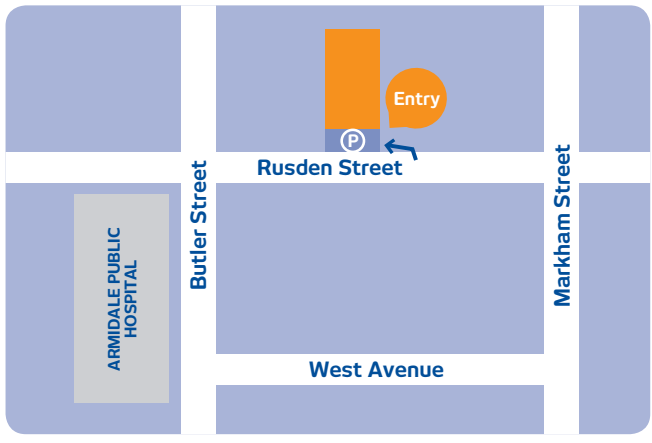
COPIES TO:

YOUR DOCTOR HAS RECOMMENDED THAT YOU USE I-MED RADIOLOGY. YOU MAY CHOOSE ANOTHER PROVIDER BUT PLEASE DISCUSS THIS WITH YOUR DOCTOR FIRST.

Results  SECURE DOWNLOAD  FAX  CD  REQUEST FOR I-MED ONLINE SETUP |  REQUEST FOR NEW REFERRAL PADS

MICROSITE\_REGIONAL

[i-medradiology.com.au](http://i-medradiology.com.au)



**Armidale**

217-219 Rusden Street, Armidale 2350  
**Tel:** (02) 6772 2349 **Fax:** (02) 6772 4757

**Please note:**

Some examinations require special preparation. Please check when making your appointment. (Appointments are not required for X-Ray)

| Practice Procedure List        | Armidale |
|--------------------------------|----------|
| MRI                            | •        |
| CT Scans                       | •        |
| Ultrasound                     | •        |
| X-Ray                          | •        |
| Mammography                    | •        |
| Nuclear Medicine with SPECT/CT | •        |
| Musculoskeletal Injections     | •        |
| Bone Mineral Density (BMD)     | •        |
| OPG (Dental)                   | •        |



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