Exact Radiology
CLINICS

CHIROPRACTIC REQUEST

PATIENT DETAILS

Name* **DOB***

Address*

Contact Number* ☐ Workers Comp

Medicare Number ☐ Third Party

EXAMINATION REQUESTED

- ☐ Cervical Spine: **A.P**
- ☐ Cervical Spine: **A.P Open Mouth**
- ☐ Cervical Spine: **Oblique**
- ☐ Cervical Spine: **Lateral (Neutral)**
- ☐ Cervical Spine: **Lateral (Flex/Ext)**
- ☐ Thoracic : **A.P**
- ☐ Thoracic : **Lateral**
- ☐ Lumbar Spine: **A.P (incl. Pelvis)**
- ☐ Lumbar Spine: **A.P**
- ☐ Lumbar Spine: **Lateral (Neutral)**
- ☐ Lumbar Spine: **Lateral (Flex/Ext)**
- ☐ Lumbar Spine: **Oblique**
- ☐ Pelvis: **Pelvis**

Non Referred / No Rebate Items

- ☐ **X-Ray:**
- ☐ **Ultrasound:**
- ☐ **Other:**

AREA TO BE EXAMINED & CLINICAL NOTES

☐ Allergies ☐ Urgent Pregnant: ☐ YES ☐ NO

For IV contrast exams, recent creatinine level / eGFR:

REFERRER DETAILS

Name* **Speciality***

Address* **Provider Number***

Contact Number* **Fax Number:**

*Must be completed

Signature* **Date***

All reports and images are available electronically (via InteleRad and/or downloads). Please tick below for your additional requests.

☐ Referral Pads Required

REPORTS ☐ Urgent Results ☐ Fax ☐ Download ☐ Phone ☐ Film ☐ Copy reports to:

PATIENT PREPARATION

- [ ] **X-RAY/OPG:** No appointment or preparation required.
- [ ] **CT:** You will receive instructions before your appointment.
- [ ] **ULTRASOUND ABDOMEN:** Fast for 8 hours, nothing to eat, drink, chew or smoke prior to appointment. Small sips of water and medication allowed.
- [ ] **ULTRASOUND PELVIS/KUB & OBSTETRIC:** Must present with full bladder, we suggest drinking 1L of water to be completed 1 hour prior to appointment time. Further instructions to be provided.
- [ ] **ECHOCARDIOGRAPHY:** No preparation.
- [ ] **MAMMOGRAPHY:** Do not wear perfume, deodorant or powder before your exam. A two-piece outfit is preferred, as you will need to remove everything from the waist up.
- [ ] **MRI:** As advised by booking clerk.

Appointment Date:

Appointment Time:

Preparation Notes:

Scan to request an appointment online

	Xray	Ultrasound	Nuchal Translucency	Echocardiography	Bone Density Study (BMD)	Mammography	Dental/OPG	Dentascans	CT	CT Virtual Colonoscopy	CT Calcification Scoring & Cardiac Angiography	Long Leg Imaging	Interventional Radiology & Pain Management	MRI
Gatton	●	●		●			●		●				●	
Plainland	●	●							●					
Ipswich (North)	●	●	●	●	●	●	●	●	●	●	●	●	●	
Ipswich (South)	●	●		●					●				●	●
Springfield Lakes	●	●	●	●			●	●	●		●		●	

Exact Radiology
CLINICS

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PLAINLAND:
Shop 12 Plainland Plaza,
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IPSWICH (NORTH):
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