



Date:			

Appointment Time:

→ Patient Information								
Name: Address:	DOB: Telephone: Medicare No:							
Examination Required	Clinical Notes							
Referring Doctor		→ Patient →	Report	• Images				
		☐ TAC ☐ Vet Affairs	Electronic Report Fax Phone	□ Films□ CD□ IntelePACS				
Signature: Date	ə:	Send copy to:						
→ MRI Safety	Cardiac Imaging							
Cardiac Pacemaker	Request for: Assessment for CTCA Cardiac Consultation CTCA (Non Medicare Rebateble)							
Cochlear Implant	Patient Age: Gende	r:						
History metal work Y N Cardiac Stent Y N Other electronic or Y N		y: ess of Breath nal ECG (please attach)	Other:					
metallic implant	Clinical Notes:							
→ Alerts	Cardiac Stress testing performed		OY	ON				
Contrast Allergy	If no, is patient suitable for stress t	esting?	OY	ON				
Renal Compromise	CXR performed to rule out pneumo	OY	ON					
Metformin ☐ Y ☐ N	Has the patient had previous cardia	ac imaging?		O N				
Pregnant OY N	PMHx of CAD, CABG			O N				
LNMP:	Strong FHx of CAD		OY	□ N				
Vision Office Use Only ☐ Patient ID Verified ☐ Procedure Verified	Please attach any previous imaging (e.g. severe asthma); has atrial fibr or allergy to idoine/contrast as CTC Creatinine eGFR:	illation or a severely irregular	rhythm; rer ılt.	Beta-blocker nal impairment;				

Services Offered:

INNER CITY North Melbourne

NORTH Coburg

Reservoir

Thornbury

EAST Bulleen

Lilydale

Carnegie

Mentone Mulgrave

Lynbrook

WEST

Werribee

Torquay Sebastopol

Kyabram

Shepparton

REGIONAL

Kangaroo Flat

Botanic Ridge Mornington

Williamstown

Diamond Creek

Greensborough

SOUTH-EAST

Hampton East

Booking Enquiry!

130 Allan Street

79A Wyndham Street



Complete our booking form and one of our staff will cor or call one of our clinics.						Ultrasound			Calcium Score	Cardiac CT	Interventional Procedures	3D Mammogra			hdə	EOS Imaging	Elastography
Address	Phone	Fax	Ho MON-FRI	urs SAT	Xray	Ultras	CT	MRI	Calciu	Cardi	Interv Proce	3D M	DEXA	OPG	Lat Ceph	EOSI	Elasto
- Taran-ess	1110110	T CON		4924								2041					
267 Flemington Road	03 9008 7266	03 9008 7274	8:30am - 5pm		•	•	•				•					•	•
364 Sydney Road	03 9966 3892	03 9966 3894	8:30am - 5pm	9am - 1pm	•	•	•				•		•				•
Reservoir Private Hospital, 24 Willoughby Street	03 9118 8246	03 9957 8169	8:30am - 5pm	9am - 1pm	•	•	•	•	•	•	•	•					•
621 High Street	03 9957 8881	03 9957 8880	8:30am - 5pm	9am - 1pm	•	•	•			•	•		•		•		•
Diamond Creek Plaza, Shop 14, 72 Main Hurstbridge Road	03 8657 4933	03 8657 4937	8:30am - 5pm	: + :	•	•	•				•						
Shop 1a & 2a, 106 Main Street	03 7044 2077	03 7044 2071	8:30am - 5pm	-	•	•	•		•	•				•			•
Bulleen Plaza, Shop 12A, 101 Manningham Road	03 9087 4344	03 9960 6143	8:30am - 5pm	9am - 1pm	•	•	•	•			•		•	•			•
275 Main Street	03 8658 0944	03 8658 0942	8:30am - 5pm		•	•	•	•	•	•	•	•	•		•		•
90 Koornang Road	03 9087 4388	03 9960 6144	8:30am - 5pm	9am - 1pm	•	•	•		•	•	•						•
336-338 South Road	03 9125 0099	03 9125 0096	8:30am - 5pm	-	•	•	•	•	•		•		•				•
45-47 Balcombe Road	03 7064 4066	03 7064 4068	8.30am - 5pm	9am - 1pm	•	•	•		•	•	•	•	•	•			•
Mulgrave Business Park, Suite G03, 372 Wellington Road	03 9087 4322	03 9960 6152	8:30am - 5pm	9am - 1pm	•	•	•		•	•	•		•	•			•
Shop 34, 75 Lynbrook Boulevard	03 7065 5811	03 7065 5815	8.30am - 5pm		•	•	•		•	•	•						•
Botanic Ridge Village, Shop 17, 10 Hummingbird Drive	03 9998 7455	03 9998 7423	8:30am - 5pm	855	•	•	•				•						•
947 Nepean Highway	03 5947 5835	03 9957 2282	8:30am - 5pm	9am - 1pm	•	•		•			•		•		•		•
					202		2/	00 10									
Shop 1, 66 Douglas Parade	03 8592 6300	03 8592 6308	8:30am - 5pm	-	•	•	•		•	•	•		•	•			•
4 Bridge Street	03 8592 6399	03 8592 6393	8:30am - 5pm	S#:	•	•	•		•	•	•		•				•
														77.7			
Torquay Medical Hub, Suite G06, 1 Cylinders Drive	03 5292 9911	03 5292 9913	8:30am - 5pm	-	•	•	•	•	•	•	•		•	•			•
43 Albert Street	03 4313 2117	03 5947 5033	8:30am - 5pm	8am - 12pm	•	•	•	•	•		•		•				•
99 - 101 High Street	03 9087 4377	03 9960 6154	8:30am - 5pm	9am - 1pm	•	•	•	•	•		•		•				•
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8:30am - 5pm

8:30am - 5pm

8am - 12pm

Bulk Billed rebatable MRI
 Non-Rebatable MRI.
 All scanners accept TAC, WorkCover and DVA patients

visionradiology.com.au **General Xray Referral Form**

03 4831 8534

03 9978 9406

03 4831 8533

03 9087 4355