

PATIENT DETAILS

Patient name:

DOB:

Phone:

Address:

Medicare:

Clinical trial / ID no.:

EXAMINATION

- PET with Whole Body Diagnostic CT (Head, Chest, Abdo, Pelvis)
- PET with localised diagnostic CT (please tick region/s)
 - Head Chest Neck Abdo Pelvis Extremity
- PET with Non-Diagnostic CT (attenuation correction)

CLINICAL NOTES

- Contrast Allergy
- Renal Impairment
- Surgery / Biopsy
- Radiation Therapy
- Chemotherapy
- Prior Imaging (when and where)

INDICATIONS

MBS ELIGIBLE ITEMS

- Solitary Pulmonary Nodule (61523)
- Non-Small Cell Lung cancer (61529)
 - Breast**
 - Staging (locally advanced) (61524)
 - Suspected metastatic or recurrent (61525)
 - Brain Tumour**
 - Residual or Recurrent Malignant Tumour (61538)
- Refractory Epilepsy (61559)
- Melanoma (61553)
- Ovarian Carcinoma (61565)
 - Cervix Carcinoma**
 - Primary Staging (61571)
 - Restaging (61575)

- Colorectal Carcinoma (61541)
- Oesophageal/GOJ (staging) (61577)
 - Metastatic SCC Cervical Nodes**
 - Unknown Primary (61610)
 - Head & Neck**
 - Staging (61598)
 - Restaging (61604)
 - Hodgkins or NHL**
 - Initial staging (61620)
 - First line therapy response (61622)
 - Restaging (61628)
 - Second line therapy response (61632)
 - Sarcoma (excluding GIST)**
 - Staging (61640)
 - Restaging/Residual/Recurrent (61646)

MBS INELIGIBLE ITEMS

- Other FDG PET
- PSMA
- NaF
- Amyloid
- FET
- Other

*MBS ineligible items will incur out of pocket fee.
MBS items must be specialist referred.*

REFERRING PRACTITIONER

Name:

Provider number:

Follow up appointment:

Send copy to:

Signature:

Date:

PET SPECIALISTS

Dr Shipra Verma
Dr Zeyad Al-Ogaili

LUNG		
Solitary Pulmonary Nodule	61523	Whole body FDG PET study, performed for evaluation of a solitary pulmonary nodule where the lesion is considered unsuitable for transthoracic fine needle aspiration biopsy, or for which an attempt at pathological characterisation has failed.
NSCLC	61529	Whole body FDG PET study, performed for the staging of proven non-small cell lung cancer, where curative surgery or radiotherapy is planned.
BRAIN		
Brain	61538	FDG PET study of the brain for evaluation of suspected residual or recurrent malignant brain tumour based on anatomical imaging findings, after definitive therapy (or during ongoing chemotherapy) in patients who are considered suitable for further active therapy.
Epilepsy	61559	FDG PET study of the brain, performed for the evaluation of refractory epilepsy which is being evaluated for surgery.
GASTROINTESTINAL		
Colorectal	61541	Whole body FDG PET study, following initial therapy, for the evaluation of suspected residual, metastatic or recurrent colorectal carcinoma in patients considered suitable for active therapy.
Oesophageal/GOJ	61577	Whole body FDG PET study, performed for the staging of proven oesophageal or GOJ carcinoma, in patients considered suitable for active therapy.
GYNAECOLOGY		
Ovarian	61565	Whole body FDG PET study, following initial therapy, performed for the evaluation of suspected residual, metastatic or recurrent ovarian carcinoma in patients considered suitable for active therapy.
Uterine Cervix	61571	Whole body FDG PET study, for the further primary staging of patients with histologically proven carcinoma of the uterine cervix, at FIGO stage IB2 or greater by conventional staging, prior to planned radical radiation therapy or combined modality therapy with curative intent.
Uterine Cervix	61575	Whole body FDG PET study, for the further staging of patients with confirmed local recurrence of carcinoma of the uterine cervix considered suitable for salvage pelvic chemoradiotherapy or pelvic exenteration with curative intent.
HEAD & NECK		
Head & Neck	61598	Whole body FDG PET study performed for the staging of biopsy-proven newly diagnosed or recurrent head & neck cancer.
Head & Neck	61604	Whole body FDG PET study performed for the evaluation of patients with suspected residual head & neck cancer after definitive treatment, and who are suitable for active therapy.
MELANOMA		
Melanoma	61553	Whole body FDG PET study, following initial therapy, performed for the evaluation of suspected metastatic or recurrent malignant melanoma in patients considered suitable for active therapy.
SCC		
Metastatic SCC unknown primary	61610	Whole body FDG PET study performed for the evaluation of metastatic squamous cell carcinoma of unknown primary site involving cervical nodes.
LYMPHOMA		
Lymphoma	61620	Whole body FDG PET study for the initial staging of newly diagnosed or previously untreated Hodgkin's or non-Hodgkin's lymphoma.
Lymphoma	61622	Whole body FDG PET study to assess response to first line therapy either during treatment or within three months of completing definitive first line treatment for Hodgkin's or non-Hodgkin's lymphoma.
Lymphoma	61628	Whole body FDG PET study for restaging following confirmation of recurrence of Hodgkin's or non-Hodgkin's lymphoma.
Lymphoma	61632	Whole body FDG PET study to assess response to second-line chemotherapy if haemopoietic stem cell transplantation is being considered, for Hodgkin's or non-Hodgkin's lymphoma.
SARCOMA		
Bone or Soft Tissue Sarcoma	61640	Whole body FDG PET study for initial staging of patients with biopsy-proven bone or soft tissue sarcoma (excluding gastrointestinal stromal tumour) considered by conventional staging to be potentially curable.
Sarcoma	61646	Whole body FDG PET study for the evaluation of patients with suspected residual or recurrent sarcoma (excluding gastrointestinal stromal tumour) after the initial course of definitive therapy to determine suitability for subsequent therapy with curative intent.
BREAST		
PET Breast	61524	Whole body FDG PET study, performed for the staging of locally advanced (stage III) breast cancer, for a patient who is considered suitable for active therapy (R) (Anaes.).
PET Breast	61525	Whole body FDG PET study, performed for the evaluation of suspected metastatic or suspected locally or regionally recurrent breast carcinoma, for a patient who is considered suitable for active therapy (R) (Anaes.).

Rockingham

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**ELECTRONIC REFERRALS
 ARE ALSO AVAILABLE**



All images are digitally archived for ten years and can be accessed by your doctor online anytime.

Your doctor has recommended you attend Qscan Radiology Clinics. You may choose another provider but please discuss this with your doctor first.