

Please complete and email this referral to webbookings@qscan.com.au or upload securely to our website at qscan.com.au/myresults

Patient name: _____

Birth date: _____

Address: _____

Phone: _____ Mobile: _____

WorkCover claim number: _____

EXAMINATION REQUESTED

- | | |
|-------------------------------------|---|
| <input type="checkbox"/> X-ray | <input type="checkbox"/> EOS imaging |
| <input type="checkbox"/> Ultrasound | <input type="checkbox"/> Interventional procedure |
| <input type="checkbox"/> CT scan | <input type="checkbox"/> Other |
| <input type="checkbox"/> MRI scan | |

CLINICAL DETAILS

TO BE REPORTED BY A PAEDIATRIC RADIOLOGIST

- | | | | |
|------------------|-----------------------------|------------------------------|---|
| Contrast allergy | <input type="checkbox"/> No | <input type="checkbox"/> Yes | |
| Renal impairment | <input type="checkbox"/> No | <input type="checkbox"/> Yes | eGFR _____ |
| Pregnant | <input type="checkbox"/> No | <input type="checkbox"/> Yes | <input type="checkbox"/> Unsure <input type="checkbox"/> Not Applicable |

REFERRING PRACTITIONER

Name: _____

Address: _____

Phone: _____ Fax: _____

Provider no: _____

Signature: _____

Date: _____

Send copy to: _____



Qscan
RADIOLOGY CLINICS
Kids

PAEDIATRIC RADIOLOGISTS

Dr Andrew Butler
Dr Jonathan Corness
Dr Craig Ferguson
Dr Thomas Hess
Dr Jane McEnery
Dr Jennifer Powell

**PLEASE TICK FOR
PRINTED IMAGES**



Qscan Radiology Clinics is committed to sustainability. All images are available digitally only unless requested.

IMAGES

- Online
 CD
 Return with patient
 Courier / Deliver

REPORT

- Electronic download
 Fax

MORE REFERRAL PADS

- A4 (computerised)
 A5 (manual)

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

qscan.com.au

YOUR NEXT APPOINTMENT

DATE: _____

TIME: _____

LOCATION: _____

OTHER: _____

Open Saturdays	X-ray	EOS	Dental & OPB	CT Scan CTCA - CT Coronary Angiography	Nuclear Medicine	PET-CT Scan	BMD/DXA	Ultrasound	Musculoskeletal Ultrasound	Echocardiography	MRI Scan
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BRISBANE CLINICS

Clinic	Ph: / Fax	Open Saturdays	X-ray	EOS	Dental & OPB	CT Scan CTCA - CT Coronary Angiography	Nuclear Medicine	PET-CT Scan	BMD/DXA	Ultrasound	Musculoskeletal Ultrasound	Echocardiography	MRI Scan
ANNERLEY Shop 7, 310 Ipswich Road	Ph: 07 3357 0388 Fax: 07 3357 0380	Sat	●		●	●		●		●	●		●
ASPLEY Shop 4, 1368 Gympie Road	Ph: 07 3863 3907 Fax: 07 3863 2358		●		●	●				●		●	
CARINDALE Millennium Centre, 2 Millennium Boulevard	Ph: 07 3873 7800 Fax: 07 3395 3184	Sat	●		●	●	●		●	●	●		● ST
CLAYFIELD College Junction, Cnr Sandgate & Wagner Roads	Ph: 07 3547 8000 Fax: 07 3262 1690		●		●	● Incl. CTCA				●	●		● ST
CLEVELAND 177 Bloomfield Street	Ph: 07 3821 1766 Fax: 07 3821 1100	Sat	●		●	●				●	●		
EVERTON PARK 456 South Pine Road	Ph: 07 3355 4422 Fax: 07 3355 4943		●		●	●				●	●		
MATER PRIVATE CLINIC Level 6, 550 Stanley Street, South Brisbane	Ph: 07 3357 0361 Fax: 07 3010 5791					● Incl. CTCA				●	●		
MEADOWBROOK Meadowbrook Shopping Village, 261 Loganlea Road	Ph: 07 3445 4800 Fax: 07 3445 4757		●			● Incl. CTCA	●			●	●		
NORTH LAKES 9 McLennan Court	Ph: 07 3448 8840 Fax: 07 3880 6118							●					
REDCLIFFE 6 Silbyn Street	Ph: 07 3357 0922 Fax: 07 3283 4277	Sat	●		●	● Incl. CTCA	●		●	●	●		● ST
RED HILL Suite 1, 81 Fulcher Road	Ph: 07 3547 8080 Fax: 07 3547 8414		●	●		●			●	●	●		● ST
TOOWONG Level 1, 65 Sylvan Road	Ph: 07 3335 5200 Fax: 07 3335 5299		●		●	● Incl. CTCA	●		●	●	●	●	● ST
VICTORIA POINT Suite 4, Lot 1 Bunker Road	Ph: 07 3207 0511 Fax: 07 3207 0922		●		●					●			
WINDSOR Homezone, 142 Newmarket Road	Ph: 07 3357 0333 Fax: 07 3357 0300	Sat	●		●	● Cone Beam	●	●	●	●	●		● ST

GOLD COAST CLINICS

Clinic	Ph: / Fax	Open Saturdays	X-ray	EOS	Dental & OPB	CT Scan CTCA - CT Coronary Angiography	Nuclear Medicine	PET-CT Scan	BMD/DXA	Ultrasound	Musculoskeletal Ultrasound	Echocardiography	MRI Scan
BURLEIGH WATERS Treetops Specialist Medical Centre, 2 Classic Way	Ph: 07 5587 6333 Fax: 07 5587 6344		●						●	●	●		
GRIFFITH UNIVERSITY DENTAL CLINIC L3 G40 Cnr Olsen Ave & Parklands Drive Southport	Ph: 07 5503 3433 Fax: 07 5503 3444					● Cone Beam							
MERMAID WATERS Q Super Centre, Cnr Bermuda & Markeri Street	Ph: 07 5526 6500 Fax: 07 5526 1764		●		●	● Incl. CTCA				●	●		
NERANG 3/12 Ferry Street	Ph: 07 5554 7070 Fax: 07 5527 4045		●		●					●	●		
PARKWOOD Parkwood Village, 76-122 Napper Road	Ph: 07 5631 7200 Fax: 07 5631 7222		●			●			●	●	●		● ST
ROBINA Robina Town Shopping Centre, Yellow Carpark	Ph: 07 5587 6363 Fax: 07 5578 7240	Sat	●		●	●	●			●	●		
SOUTHPORT Pacific Private Clinic, 123 Nerang Street	Ph: 07 5503 3433 Fax: 07 5503 3444	Sat	●	●		●	●	●		●	●		● ST
UPPER COOMERA Home Consortium, Cnr Old Coach & Days Roads	Ph: 07 5649 7870 Fax: 07 3539 9860	Sat	●		●	●				●	●		● ST