

PATIENT DETAILS

Patient name:

DOB:

Phone:

Address:

Medicare:

Clinical trial / ID no.:

EXAMINATION

- PET with Whole Body Diagnostic CT (Head, Chest, Abdo, Pelvis)**
 Plus Extremity (eg. Melanoma, Sarcoma, Myeloma, PUO, Vasculitis/Arteritis, Rheumatological or where limb involvement suspected)
- PET with localised diagnostic CT (please tick region/s)**
 Head Neck Chest Abdo Pelvis Extremity
- PET with Non-Diagnostic CT (attenuation correction)**

INITIAL STAGING - 61563

- The patient has intermediate to high-risk prostate adenocarcinoma**

Please insert value for at least one of the following:

PSA (>10 ng/ml):

Gleason score (> or = 7):

ISUP (> or = 2):

Stage (> or = T2b):

- The patient has previously been untreated**
- The patient is considered suitable for locoregional therapy with curative intent**

Other clinical details:

RESTAGING - 61564

- The patient has previously had a PSMA PET study for initial staging of intermediate to high-risk prostate adenocarcinoma**
- The patient has undergone prior locoregional therapy and is considered suitable for further locoregional therapy**

Other clinical details:

NON-MEDICARE ELIGIBLE PSMA

Other clinical details:

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

REFERRING PRACTITIONER

Name:

Provider number:

Follow up appointment:

Send copy to:

Signature:

Date:

PSMA

Initial staging	61563	Whole body prostate specific membrane antigen PET study performed for the initial staging of intermediate to high risk prostate adenocarcinoma, for a previously untreated patient who is considered suitable for locoregional therapy with curative intent. Applicable once per lifetime.
Restaging	61564	Whole body prostate-specific membrane antigen PET study performed for the restaging of recurrent prostate adenocarcinoma, for a patient who: (a) has undergone prior locoregional therapy; and (b) is considered suitable for further locoregional therapy to determine appropriate therapeutic pathways and timing of treatment initiation This item can be claimed by patients with: <ul style="list-style-type: none">• a prostate specific antigen (PSA) increase of 2ng/ml above the nadir after radiation therapy; or• failure of PSA levels to fall to undetectable levels; or• rising PSA serum after a radical prostatectomy. Applicable twice per lifetime.

HOBART

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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.

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**ELECTRONIC REFERRALS
ARE ALSO AVAILABLE**



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