

RADIOLOGY REFERRAL



If renal impairment, recent creatinine/eGFR = _____

Doctor Sign: _____ Date: _____ Workers Compensation Film - Yes

Please bring this form, Medicare and health care cards to your appointment along with any previous relevant films.

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For enquiries or bookings please call:

Qscan Chatswood.....02 8423 2700

Qscan Kingswood.....02 4761 4200

Qscan Ryde02 9813 2500

Qscan Westmead.....02 4761 4225



**BOOK AN
APPOINTMENT**