

Next Appointment with Doctor

Appt Date _____

Bookings telephone: **08 6382 3888**
Please bring any previous scans or X-rays with you.

Patient Details

Surname _____

First Name _____ DOB _____

Address _____

Postcode _____

Telephone (H) _____ (B) _____ (M) _____

Examination

**CT
Coronary**

- Angiogram (rebateable if specialist referred) for:
 - stable ischaemia/low-med risk
 - exclusion anomaly or fistula
 - pre-op non-coronary cardiac surgery
- Coronary Angiogram (non rebateable)
- Calcium Score (only)
- PV ablation assessment

NUCLEAR

- Stress Perfusion
- V/Q Scan
- Bone Scan
- Other _____

**CT
Angiogram**

- CTPA
- Carotid
- Aorta
- Renal

ULTRASOUND

- Carotid Duplex
- DVT

**CT
Chest**

- HRCT (Non-Contrast)
- Contrast CT
- Low dose CT (CXR replacement)
- Paranasal sinuses

MRI

- Cardiac

Clinical Details

Allergies

Requesting Practitioner

Signature _____

Date _____

Copy to _____

ENVISION

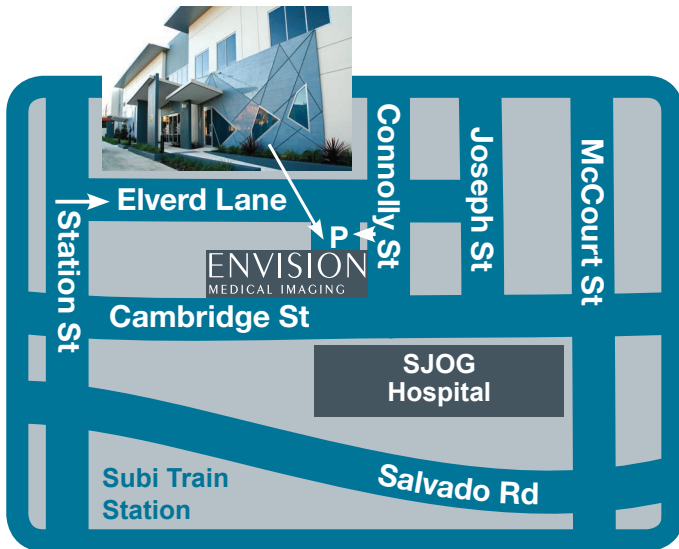
MEDICAL IMAGING



Bookings: Tel: 08 6382 3888 | Fax: 08 6382 3800 | Email: bookings@envisionmi.com.au

Please phone to arrange an appointment or email us and we will contact you with a convenient time and day. Please fax this form prior to your appointment.

Envision Medical Imaging is a private billing practice with payment required on the day of your examination.



Main office
178-190 Cambridge Street (Opp SJOG Hospital)
Wembley WA 6014
(Free parking at rear of building)

MRI • CT • X-RAY • ULTRASOUND • NUC MED • DENTAL

Patients coming for After-Hours MRI Appointments should use the entrance at the rear of building where free parking is available.

Hours of Operation

Monday to Friday 8.30am – 5.00pm

(MRI is available out of hours Mondays – Thursdays and weekends)

Tel: (08) 6382 3888

Fax: (08) 6382 3800

Email: bookings@envisionmi.com.au