

San Radiology & Nuclear Medicine

EOS® (Long Length Imaging) Request

Scan QR code to request an appointment



SYDNEY ADVENTIST HOSPITAL
 185 Fox Valley Rd, Wahroonga NSW 2076
Appointments: 02 9480 9840
Enquiries: 02 9480 9850
San Radiology Level 3, Tulloch Building
Email: radiology@sah.org.au
Fax: 02 02 9480 9845

Patient Name: _____ D.O.B: _____

Address: _____ Postcode: _____

Phone: _____ Mobile: _____ MRN: _____

IMAGING REQUIREMENTS

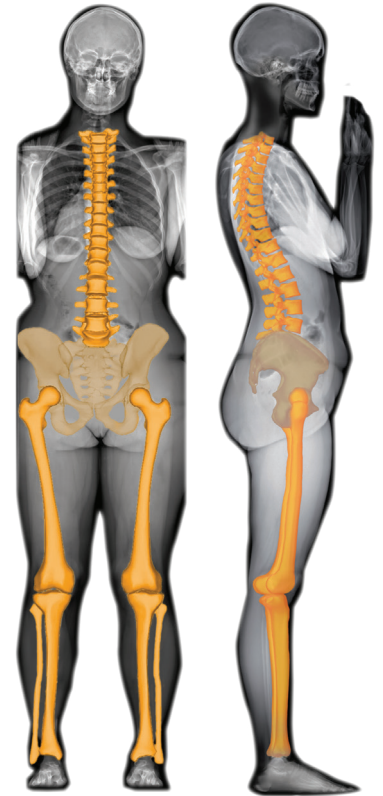
- | | | | | | |
|-----------------------------------------------------------|-----------------------------|------------------------------|----------------------------------------------|------------------------------------------|------------------------------------|
| <input type="checkbox"/> Full spine | <input type="checkbox"/> AP | <input type="checkbox"/> LAT | | | |
| <input type="checkbox"/> Full spine including lower limbs | <input type="checkbox"/> AP | <input type="checkbox"/> LAT | | | |
| <input type="checkbox"/> Full spine and pelvis | <input type="checkbox"/> AP | <input type="checkbox"/> LAT | | | |
| <input type="checkbox"/> Full spine and pelvis + knees | <input type="checkbox"/> AP | <input type="checkbox"/> LAT | | | |
| <input type="checkbox"/> Lower Limb/s | <input type="checkbox"/> AP | <input type="checkbox"/> LAT | <input type="checkbox"/> Left | <input type="checkbox"/> Right | <input type="checkbox"/> Bilateral |
| <input type="checkbox"/> Cervical Spine Only | <input type="checkbox"/> AP | <input type="checkbox"/> LAT | <input type="checkbox"/> Flexion & Extension | | |
| <input type="checkbox"/> Thoracic Spine Only | <input type="checkbox"/> AP | <input type="checkbox"/> LAT | <input type="checkbox"/> Flexion & Extension | | |
| <input type="checkbox"/> Lumbar Spine Only | <input type="checkbox"/> AP | <input type="checkbox"/> LAT | <input type="checkbox"/> Flexion & Extension | <input type="checkbox"/> Lateral Bending | |
| <input type="checkbox"/> Lumbar Spine (including Pelvis) | <input type="checkbox"/> AP | <input type="checkbox"/> LAT | <input type="checkbox"/> Flexion & Extension | <input type="checkbox"/> Lateral Bending | |
| <input type="checkbox"/> Other | | | | | |

ASSESSMENT REQUIREMENTS (POST-PROCESSING)

- | | |
|------------------------------------------------------|---------------------------------------------|
| <input type="checkbox"/> Postural Assessment | <input type="checkbox"/> Pelvic Parameters |
| <input type="checkbox"/> Leg Lengths | <input type="checkbox"/> Other Measurements |
| <input type="checkbox"/> No Post Processing Required | _____ |

OTHER IMAGING

- | | |
|----------------------------------------------|--------------------------------------|
| <input type="checkbox"/> CT (Low Dose) _____ | <input type="checkbox"/> US _____ |
| <input type="checkbox"/> MRI (3T) _____ | <input type="checkbox"/> Other _____ |



CLINICAL NOTES

(Specific regions of interest/pain can be marked on the EOS images provided above)

REFERRER DETAILS

Name: _____

Provider No: _____

Address: _____

Copy to: _____

Phone: _____ Fax: _____

Signature: _____ Date: _____

Your doctor has recommended you use San Radiology and Nuclear Medicine. You may choose another provider but please discuss this with your doctor first.

IF POSSIBLE PLEASE EMAIL, FAX OR SCAN THE QR CODE TO SEND THIS REQUEST AHEAD OF MAKING YOUR APPOINTMENT. PLEASE REMEMBER TO ALSO BRING THIS REQUEST FORM AND ANY RELEVANT PREVIOUS IMAGING.

- PLEASE TICK TO OPT OUT OF PRINTED IMAGES
 All images are available online

MY APPOINTMENT DETAILS

Appt Date: _____ / _____ / _____

Appt Time: _____

NOTES

Examinations or Procedures	Sydney Adventist Hospital		Parkway San Clinic
	San Radiology – Level 3, Tulloch Building & Clark Tower	Nuclear Medicine – Level 3, San Clinic	Ground Floor, Suite G01
Bone Mineral Densitometry	✓	✗	✗
CT Scan (Non-Cardiac)	✓	✗	✓
CT Scan (Cardiac / CTCA)	✓	✗	✓
Echocardiography	✓	✗	✗
EOS (Long Length Imaging)	✓	✗	✗
Interventional Procedures	✓	✗	✓
Mammography 2D / 3D / Contrast Enhanced	✓	✗	✗
MRI - High Resolution (3T)	✓	✗	✗
Nuclear Medicine	✗	✓	✗
PET & PET-CT	✗	✓	✗
Theranostics	✗	✓	✗
Ultrasound	✓	✗	✓
Digital X-Ray	✓	✗	✓



HOW TO FIND US

San Radiology: Enter the Hospital entrance at the traffic lights on Fox Valley Road (Entry 1). Park in **P₁**

Nuclear Medicine | PET-CT: Enter the Hospital entrance at the traffic lights on Fox Valley Road (Entry 1). Park in **P₂**



www.sanradiology.com.au

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