

# San Radiology & Nuclear Medicine

## Cardiovascular Imaging Request

Scan QR code to request an appointment



### SYDNEY ADVENTIST HOSPITAL

185 Fox Valley Road, Wahroonga NSW 2076

Appointments: 02 9480 9840

Enquiries: 02 9480 9850

Radiology/MRI Level 3, Tulloch Building

Email: radiology@sah.org.au

Fax: 02 9480 9845

Nuclear Medicine/PET-CT Level 3, San Clinic

Email: nmadmin@sah.org.au

Fax: 02 9480 8755

Patient Name: \_\_\_\_\_

D.O.B: \_\_\_\_\_

Address: \_\_\_\_\_

Postcode: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

MRN: \_\_\_\_\_

### CORONARY CT

Medicare eligible (specialist / consultant physician referral only)

#### CT Coronary Angiography

57360 - for a patient not known to have coronary artery disease who:

- has stable or acute symptoms consistent with coronary ischaemia
- is at low to intermediate risk of an acute coronary event, including having no significant cardiac biomarker elevation and no electrocardiogram changes indicating acute ischaemia

57364 - at least one of the following apply to the patient:

- stable symptoms and newly recognised left ventricular systolic dysfunction of unknown aetiology
- requires exclusion of coronary artery anomaly or fistula
- the patient will be undergoing non-coronary cardiac surgery
- meets the criteria to be eligible for a service to which item 38247, 38249 or 38252 applies\*, but as an alternative to selective coronary angiography will require an assessment of the patency of one or more bypass grafts

#### Non-Medicare eligible

#### CT Coronary Angiography

- Other: eg. GP Referral and/or does not comply with the item number descriptors listed above

#### Coronary Calcium Score

- Coronary Calcium Score

\* These items are 'Selective Coronary Angiography - native & graft with or without Left heart catheterisation', for acute indications, stable indications, and pre-surgery assessment: non-coronary cardiac surgery respectively.

### CARDIOVASCULAR MRI

Medicare eligible (specialist referral only) for the assessment or exclusion of:

- Congenital disease of the heart or a great vessel
- Tumour of the heart or great vessels
- Abnormality of the thoracic aorta (thoracic aortic dissection, aneurysm, Marfan's etc)
- Vascular abnormality with previous anaphylactic reaction to contrast
- Obstruction of the SVC, IVC or major pelvic vein
- ARVC
  - Symptoms of
  - Investigative findings of
  - Asymptomatic with 1st degree relative with ARVC

#### Non Medicare eligible

- Acquired Pericardial/Myocardial non-neoplastic infiltration/inflammation/ischaemia/fibrosis (including sarcoidosis, amyloidosis, ischaemic viability/scar assessment)
- Acquired valvular disease
- Other \_\_\_\_\_

### CARDIOVASCULAR CT

- TAVI Workup
- Congenital Heart Disease
- Pulmonary Vein Assessment (RFA Planning)
- Aortic Assessment
- LAA Device Planning
- Other \_\_\_\_\_

### NUCLEAR CARDIOLOGY

- Gated heart pool scan
- Cardiac Perfusion (SestaMIBI)  
*(Refer to back of request form for MBS Descriptors)*
  - 61345 - Specialist Referral - Ischaemia (Rest & Stress)
  - 61349 - Specialist Referral - Ischaemia (Rest & Stress) (post revascularisation)
  - 61321 - Specialist Referral - Viability (Tc99m)
  - 61325 - Specialist Referral - Viability (Tl201)
  - 61329 - GP Referral - Ischaemia (Rest & Stress)
- Pyrophosphate Scan (cardiac amyloid)

### San Echocardiography

- Trans-Thoracic (TTE)
- Trans-Oesophageal (TOE)
- Trans-Oesophageal with PVI (TOE-PVI)
- \_\_\_\_\_
- \_\_\_\_\_

### CLINICAL NOTES (please attach any relevant letters or prior reports)

Contraindication for beta blocking?  Yes  No

Any previous IV contrast allergy?  Yes  No

Is the patient diabetic?  Yes  No

What is current Creatinine? \_\_\_\_\_

What is current eGFR? \_\_\_\_\_

### 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.

PLEASE FAX OR EMAIL THIS REQUEST TO SAN RADIOLOGY & NUCLEAR MEDICINE AHEAD OF MAKING YOUR APPOINTMENT. PLEASE REMEMBER TO BRING THIS REQUEST FORM AND ANY RELEVANT PREVIOUS IMAGING TO YOUR APPOINTMENT.

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

## REFERRER REFERENCE TABLE FOR CARDIAC NUCLEAR MEDICINE

MBS Item Number	Referrer Group	Descriptor Summary (Link to front of Request Form)	Detailed Descriptor in Medicare Benefits Schedule
61321	Specialist	<u>Specialist Referral - Viability (Tc99m)</u> [1 exam every 2 years]	Rest Only (Tc99m) for assessment of extent and severity of viable and non-viable myocardium
61325	Specialist	<u>Specialist Referral - Viability (TI201)</u> [1 exam every 2 years]	Rest Only (TI201) for assessment of extent and severity of viable and non-viable myocardium
61324	Specialist	<u>Specialist Referral - Ischaemia (Stress Only)</u> [1 exam every 2 years]	Stress Only, ischaemic symptoms that a stress echocardiography is unlikely to provide adequate information due to body habitus/other physical condition, or inability to exercise or has had an assessment of undue exertional dyspnoea of uncertain aetiology
61345	Specialist	<u>Specialist Referral - Ischaemia (Rest &amp; Stress)</u> [1 exam every 2 years]	Rest and Stress, ischaemic symptoms that a stress echocardiography is unlikely to provide adequate information due to body habitus/other physical condition, or failed stress echo, or inability to exercise or has had an assessment of undue exertional dyspnoea of uncertain aetiology
61349	Specialist	<u>Specialist Referral - Ischaemia (Rest &amp; Stress - post revascularisation)</u> [1 exam per year]	Repeat Rest and Stress, when had prior imaging in last 24 months and a revascularisation procedure has ischaemic symptoms that a stress echocardiography is unlikely to provide adequate information due to body habitus/other physical condition, or failed stress echo or inability to exercise or has had an assessment of undue exertional dyspnoea of uncertain aetiology
61329	GP	<u>GP Referral - Ischaemia (Rest &amp; Stress)</u> [1 exam every 2 years]	Rest and Stress, ischaemic symptoms that a stress echocardiography is unlikely to provide adequate information due to body habitus/other physical condition, or failed stress echo, or inability to exercise or has had an assessment of undue exertional dyspnoea of uncertain aetiology
61357	GP	<u>GP Referral - Ischaemia (Stress Only)</u> [1 exam every 2 years]	Stress Only, ischaemic symptoms that a stress echocardiography is unlikely to provide adequate information due to body habitus/other physical condition, or inability to exercise or has had an assessment of undue exertional dyspnoea of uncertain aetiology

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	✓	✗	✓

## MY APPOINTMENT DETAILS

Appt Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Appt Time: \_\_\_\_\_

Note: \_\_\_\_\_

## HOW TO FIND US

### San Radiology:

Enter the Hospital entrance at the traffic lights on Fox Valley Road (Entry 1). Park in **P<sub>1</sub>**

### Nuclear Medicine | PET-CT:

Enter the Hospital entrance at the traffic lights on Fox Valley Road (Entry 1). Park in **P<sub>2</sub>**

**Parkway San Clinic:** Entry and exit to and from the Parkway San Clinic carpark is left in and left out only, on both Fox Valley Road and the Comenarra Parkway.



[www.sanradiology.com.au](http://www.sanradiology.com.au)

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## PATIENT PREPARATION

\* If you are **DIABETIC**, please ensure that you inform our staff at the time of your booking as different preparation instructions may apply.

### Coronary Angiography (CTCA)/ Cardiovascular CT

- No food for 1 hour (unless Diabetic\*)
- Maintain normal fluid intake
- Avoid strenuous exercise and smoking
- (CTCA only) Take all regular medication, except Viagra, Levitra and/or Cialis which MUST be ceased 3 days prior

### Cardiovascular MRI

- Avoid eating food for 4 hours (unless diabetic\*)
- Maintain normal fluid intake, but avoid caffeine (e.g. tea and coffee)
- Avoid strenuous exercise
- Avoid smoking

### Cardiac Perfusion (MIBI)

- No food for 4 hours (unless Diabetic\*)
- Maintain normal fluid intake
- Wear comfortable clothes and shoes
- No caffeine 24 hours prior (tea, herbal tea, coffee, chocolate, cola)
- If OK by referring doctor:
  - 48 hours prior; NO betablockers, persantin, asasantin or theophylline
  - 24 hours prior; NO calcium antagonists

### Echocardiography

- **Trans-Thoracic Echocardiography (TTE)**
  - No preparation is required
- **Trans-Oesophageal Echocardiography (TOE)**
  - Nothing to eat or drink for 6 hours prior to your appointment.
  - If you are required to take tablets, mention this to the Radiology Nurse who will contact you prior to your procedure.
  - After the procedure you will be observed for approximately 2 hours.
  - You will need someone to drive you home and stay with you overnight.
- **Trans-Oesophageal Echocardiography with PVI (TOE-PVI)**
  - Please consult your Cardiologist.

