

San Radiology & Nuclear Medicine

Spinal Imaging Request & Interventional Procedure Referral

Scan QR code to request an appointment



San Radiology & Nuclear Medicine
Level 3, Tulloch Building
Sydney Adventist Hospital
185 Fox Valley Road, Wahroonga NSW 2076
Appointments: 02 9480 9840
Enquiries: 02 9480 9850
Fax: 02 9480 9845
Email: radiology@sah.org.au

Patient Name: _____ D.O.B: _____
Address: _____ Postcode: _____
Phone: _____ Mobile: _____ MRN: _____

INTERVENTIONAL PROCEDURE REQUIRED

Please accept this form as a referral for this patient for investigation, opinion, treatment and/or management of a condition or problem.

- FACET JOINT CORTISONE INJECTION**
 - Cervical _____ (indicate level/s)
 - Lumbar _____ (indicate level/s)
 - Other _____
- PERIRADICULAR BLOCK**
 - Cervical _____ (indicate level/s)
 - Lumbar _____ (indicate level/s)
 - Other _____
- PERINEURAL INJECTION / BLOCK**
 - Greater Occipital Nerve
 - Pudendal Nerve
 - Other _____
- DISCOGRAM** _____ (indicate level/s)
- MYELOGRAM**
 - Cervical _____ (indicate level/s)
 - Lumbar _____ (indicate level/s)
- VERTEBROPLASTY** _____ (indicate level)
- CSF LEAK +/- BLOOD PATCH** _____ (indicate level)
- SPINAL BIOPSY** _____ (indicate level)
- OTHER EXAMINATION** _____

CLINICAL NOTES

Previous contrast allergy? Yes No
Could the patient be pregnant? Yes No
Is patient diabetic? Yes No
Creatinine: _____

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: _____

Note: _____

PATIENT INFORMATION

Please enquire at the time of making your appointment. In most instances, you will:

- Be required to stay in the department for up to 1 hour after your procedure;
- You will not be able to drive after your procedure so will need to make arrangements for an escort/transportation home.

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**

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.

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	✓	✗	✓



www.sanradiology.com.au

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