

Date PET/CT required by: / /

Patient details

Name

DOB / /

Address

Telephone

Clinical Notes:

 Tracer: 18F PSMA 18F FDG

Diagnostic Contrast CT: please tick box

CT Brain CT C/A/P CT A/P CT IVP

PET indication: please tick box

Prostate	<input type="checkbox"/> Initial Staging: Intermediate to high risk prostate adenocarcinoma, untreated, considered for locoregional therapy. 1 scan per lifetime - 61563
	<input type="checkbox"/> Restaging: Has previously had PSMA PET for initial staging, has undergone locoregional therapy considered suitable for locoregional therapy. PSMA increase of 2ng/ml above nadir post RT; or Failure of PSA to fall to undetectable levels; or Rising PSA after radical prostatectomy. 2 scans per lifetime- 61564
Non Rebatable Indications:	<input type="checkbox"/> Prostate PSMA scan <input type="checkbox"/> Prostate FDG scan <input type="checkbox"/> PSMA scan for other indication

Indication for PET Scan:

Diagnosis Staging Therapeutic Monitoring Restaging Other

Clinical Staging: T N M Gleason Score / Tumour Grade:

Biopsy: Date: / / No Sites: Recent PSA

Histopathology Infectious precautions Y N eGFR Date: / /

Other Treatment (tick):

Surgery	Y <input type="checkbox"/> N <input type="checkbox"/>	Date: / / Site
Radiotherapy	Y <input type="checkbox"/> N <input type="checkbox"/>	Date: / / Site
Brachytherapy	Y <input type="checkbox"/> N <input type="checkbox"/>	Date: / / Site
Hormone Therapy	Y <input type="checkbox"/> N <input type="checkbox"/>	Date: / / Site

Additional Clinical History:

<input type="checkbox"/> Previous imaging:	Provider/Location	Date
<input type="checkbox"/> CT	 / /
<input type="checkbox"/> MRI	 / /
<input type="checkbox"/> Bone Scan	 / /
<input type="checkbox"/> PET	 / /

Referring doctor's details

Practitioner name

Provider number

Address

Phone Fax

Signature Date

Copy to

Internal use only

Pregnant Y N

Patient identification verified

Procedure and consent verified

Tech name/position:

My appointment

Date

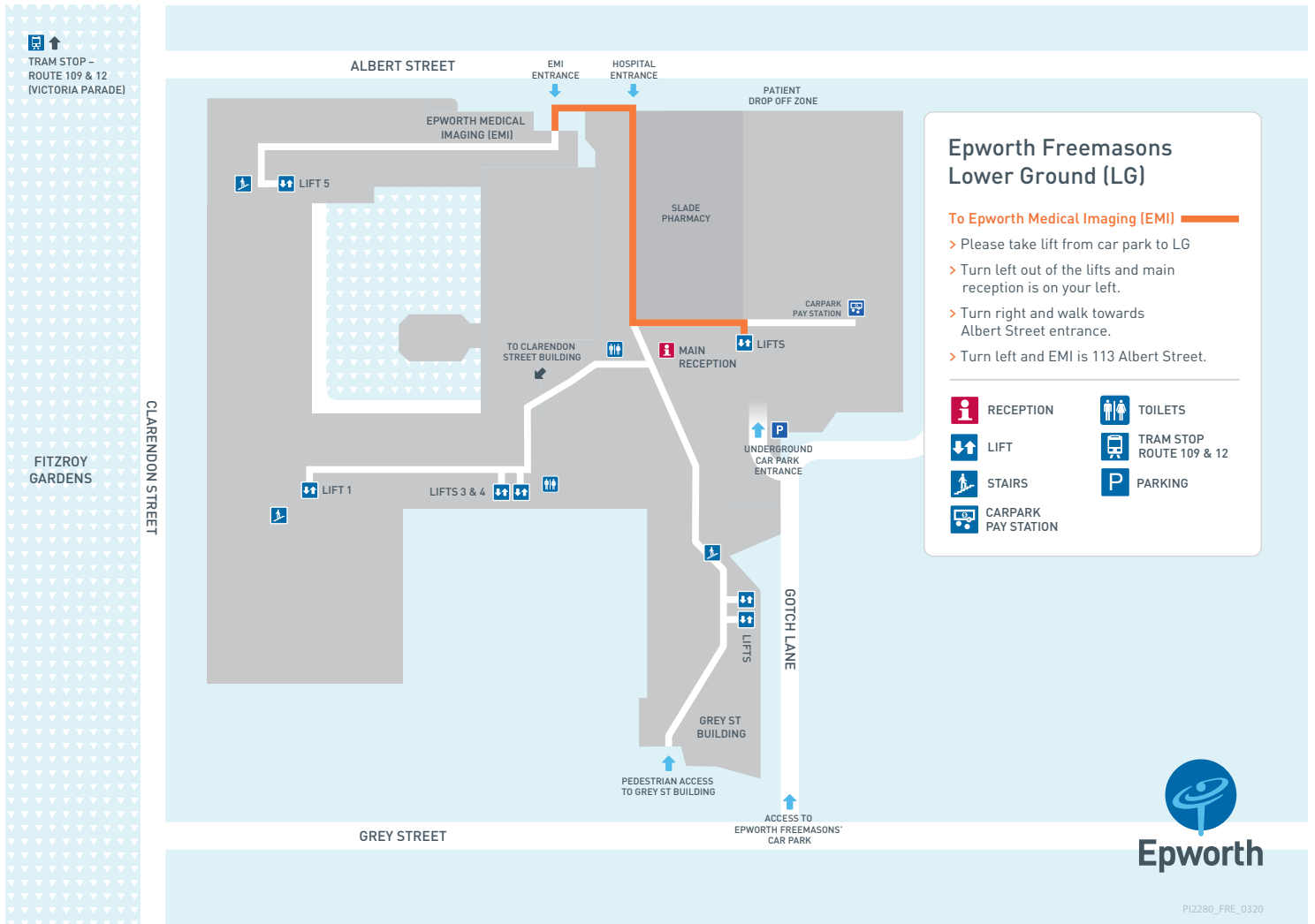
Location **Epworth Freemasons - 113 Albert Street East Melbourne**

Other

Time

Patient preparation

You will be provided with important patient preparation information for your PET/CT study.
 For more information about your PET examination please visit epworthmedicalimaging.com.au



Epworth Freemasons Lower Ground (LG)

To Epworth Medical Imaging (EMI)

- > Please take lift from car park to LG
- > Turn left out of the lifts and main reception is on your left.
- > Turn right and walk towards Albert Street entrance.
- > Turn left and EMI is 113 Albert Street.

	RECEPTION		TOILETS
	LIFT		TRAM STOP ROUTE 109 & 12
	STAIRS		PARKING
	CARPARK PAY STATION		

Your doctor has recommended you use Epworth Medical Imaging.
 You may choose another provider but please discuss this with your doctor first.

Epworth Freemasons

113 Albert Street East Melbourne
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 Email pet@emi.net.au