

Epworth Freemasons 113 Albert Street East Melbourne Phone 03 9297 8200 | Fax 03 9297 8222 pet@emi.net.au

PET/CT Request/Referral

	Name		se site:							
ails	DOB	1 1	v:							
Patient details	Address			_ast:Next:						
ent	•		Planning PET/CT: Yes No							
Pati	Medicare	No.								
	Telephone	9		Radiotherapy: Last:						
D (en and site of melanoma):						
Ref	erral De	tails Reason for Referral and Clinical History	Previous PET scan: ☐ Yes ☐ No Location:							
				Metformin: ☐Yes ☐No						
			eGFR:			Date:				
			Date PET/CT	Date PET/CT required by:						
			PET/CT Tra	/CT Tracer: ☐ F18 FDG ☐ F18 PSMA ☐ 68 Ga DOT.						
				□ F18	FET □F1	8 FES	TF18 FBB			
Please tick PET indication and diagnostic CT requirements					Diagnostic contrast CT					
		Medicare eligible indication				Chest,				
Grou	ping	[Medicare criteria on reverse]	PE	T Brain	Neck	Abdo & Pelvis	Other			
		Malignant brain tumour, after definitive therapy (61538)				retvis				
Brain		Refractory epilepsy, being evaluated for surgery (61559)								
		Diagnosis of Alzheimer's Disease (AD), clinical evaluation equivocal, 61560/61402								
		not performed in last 12 months for AD (61560)								
Breast		Staging of locally advanced (Stage III) breast cancer (61524)								
		Evaluation of suspected metastatic breast carcinoma, suitable for active therapy (61525)								
GIT		Colorectal carcinoma, for active therapy (61541)								
		Oesphageal or GEJ carcinoma, staging of proven (61577)								
Gynae		Ovarian carcinoma, following initial therapy, suitable for active therapy (61565)								
		Uterine cervix carcinoma, primary staging (61571)								
		Uterine cervix carcinoma, recurrent cancer for staging (61575)								
Head .	& neck	Head and Neck cancer, staging of biopsy proven (61598)								
		Head and neck cancer, suspected residual cancer (61604)								
Lung		Solitary pulmonary nodule, staging (61523)								
		Non-small cell lung cancer, staging of proven (61529)								
		HL or NHL, initial staging or untreated (61620)								
Lymphoma		HL or NHL, assess response to first line therapy (61622)								
		HL or NHL, restaging of recurrence (61628)								
		HL or NHL, assess response to second line chemo (61632)								
Melan		Melanoma, suspected metastatic or recurrence (61553)								
	tatic SCC endocrine	Metastatic SCC, unknown primary involving cervical nodes (61610)								
		68Ga- DOTA . evaluation of gastro-entero-pancreatic neuroendocrine tumour (61647) Prostate, initial staging of intermediate to high-risk prostate adenocarcinoma (61563)								
Prosta (PSM/		Prostate, restaging of intermediate to high-risk prostate adenocal choma (61563) Prostate, restaging with prior locoregional therapy and suitable for active therapy (61564)								
Rare ar	nd	Rare or uncommon tumours (1/12 cases per 100,000) suitable for active therapy (61612)								
ıncom	mon Cancer	Sarcoma, initial staging biopsy proven bone or soft tissue excluding GIST (61640)								
Sarco	ma	Sarcoma, suspected residual or recurrent tumour excluding GIST (61646)								
		Non-Rebatable indications	PE	T Brain	Neck	Chest, Abdo &	Other			
		Non Newatable indications	FE	Diam	Heck	Pelvis	Other			
Other										

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ferr	Signature	Date		
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BREAST		
Staging of locally advanced (Stage III) breast Ca	61524	BREAST CANCER, Stage III, Whole body FDG PET study performed for the staging of locally advanced (Stage III) breast cancer in a patient considered potentially suitable for active therapy.
Suspected metastatic or recurrent	61525	BREAST CANCER, Whole body FDG PET study performed for the evaluation of suspected metastatic or suspected locally or regionally recurrent breast carcinoma in a patient considered suitable for active therapy.
LUNG		
Solitary Pulmonary Nodule	61523	SOLITARY PULMONARY NODULE evaluation, Whole body FDG PET study, performed for evaluation of a solitary pulmonary nodule where the lesion is considered unsuitable for transthoracic fine needle aspiration biopsy, or for which an attempt at pathological characterisation has failed.
Non-Small Cell Lung Cancer – Staging	61529	NON-SMALL CELL LUNG CANCER, Whole body FDG PET study, performed for the staging of proven non-small cell lung cancer, where curative surgery or radiotherapy is planned.
LYMPHOMA		
HL or NHL, initial staging	61620	HL or NHL, Whole body FDG PET study for the initial staging of newly diagnosed or previously untreated Hodgkin's or non-Hodgkin's lymphoma.
HL or NHL, assess response to first line therapy	61622	HL or NHL, Whole body FDG PET study to assess response to first line therapy either during treatment or within three months of completing definitive first line treatment for Hodgkin's or non-Hodgkin's lymphoma.
HL or NHL, restaging	61628	HL or NHL, Whole body FDG PET study for restaging following confirmation of recurrence of Hodgkin's or non-Hodgkin's lymphoma.
HL or NHL, assess response to second line chemo	61632	HL or NHL, Whole body FDG PET study to assess response to second-line chemotherapy when stem cell transplantation is being considered, for Hodgkin's or non-Hodgkin's lymphoma.
HEAD & NECK		
Head and Neck Ca, staging	61598	HEAD and NECK CANCER, Whole body FDG PET study performed for the staging of biopsy-proven newly diagnosed or recurrent head and neck cancer.
Suspected residual Ca	61604	HEAD and NECK CANCER, Whole body FDG PET study performed for the evaluation of patients with suspected residual head and neck cancer after definitive treatment, and who are suitable for active therapy.
Metastatic SCC	61610	METASTATIC SCC, Whole body FDG PET study performed for the evaluation of metastatic squamous cell carcinoma of unknown primary site involving cervical nodes.
GASTROINTESTINAL		
Colorectal Carcinoma	61541	COLORECTAL CARCINOMA, Whole body FDG PET study, following initial therapy, for the evaluation of suspected residual, metastatic or recurrent colorectal carcinoma in patients considered suitable for active therapy.
Oesophageal or GEJ carcinoma	61577	OESOPHAGEAL or GEJ CARCINOMA, Whole body FDG PET study, performed for the staging of proven oesophageal or GEJ carcinoma, in patients considered suitable for active therapy.
GYNAECOLOGICAL	-	
Ovarian carcinoma	61565	OVARIAN CARCINOMA, Whole body FDG PET study, following initial therapy, performed for the evaluation of suspected residual, metastatic or recurrent ovarian carcinoma in patients considered suitable for active therapy.
Uterine cervix carcinoma, primary staging	61571	UTERINE CERVIX CARCINOMA, Whole body FDG PET study, for the further primary staging of patients with histologically proven carcinoma of the uterine cervix, at FIGO stage IB2 or greater by conventional staging, prior to planned radical radiation therapy or combined modality therapy with curative intent.
Uterine cervix carcinoma,	61575	UTERINE CERVIX CARCINOMA, Whole body FDG PET study, for the further staging of patients with confirmed local recurrence of carcinoma of the
recurrent Ca SARCOMA		uterine cervix considered suitable for salvage pelvic chemoradiotherapy or pelvic exenteration with curative intent.
Initial staging	61640	SARCOMA, Whole body FDG PET study for initial staging of patients with biopsy-proven bone or soft tissue sarcoma (excluding gastrointestinal
		stromal tumour) considered by conventional staging to be potentially curable.
Suspected residual or recurrent	61646	SARCOMA, Whole body FDG PET study for the evaluation of patients with suspected residual or recurrent sarcoma (excluding gastrointestinal stromal tumour) after the initial course of definitive therapy to determine suitability for subsequent therapy with curative intent.
PROSTATE		
PSMA initial staging	61563	Whole body PSMA PET study performed for the initial staging of intermediate to high-risk prostate adenocarcinoma, for a previously untreated patient who is considered suitable for locoregional therapy with curative intent. Medicare benefits are payable for a maximum of one service in the patient's lifetime.
PSMA restaging	61564	Whole body PSMA PET study performed for the restaging of recurrent prostate adenocarcinoma, for a patient who has undergone prior locoregional therapy and is considered suitable for further locoregional therapy to determine appropriate therapeutic pathways and timing of treatment initiation. This item can be claimed by patients with a prostate specific antigen (PSA) increase of 2ng/ml above the nadir after radiation therapy; or failure of PSA levels to fall to undetectable levels; or rising PSA serum after a radical prostatectomy. Medicare benefits are payable for a maximum of two services in the patient's lifetime.
BRAIN		
Alzheimer's Disease	61560	ALZHEIMER'S DISEASE, FDG PET study of the brain, performed for the diagnosis of [61560 + 56001], if: a) clinical evaluation of the patient by a specialist, or in consultation with a specialist, is equivocal; and b) the service includes a quantitative comparison of the results of the study with the results of an FDG PET study of a normal brain from a reference database; and c) a service to which this item applies has not been performed on the patient in the previous 12 months; and d) a service to which item 61402 applies has not been performed on the patient in the previous 12 months for the diagnosis or management of
Malignant Brain Tumour	61538	Alzheimer's disease. Applicable not more than 3 times per lifetime MALIGNANT BRAIN TUMOUR, FDG PET study of the brain for evaluation of suspected residual or recurrent malignant brain tumour based on anatomical imaging findings, after definitive therapy (or during ongoing chemotherapy) in patients who are considered suitable for further active
Refractory Epilepsy (evaluated for	61559	REFRACTORY EPILEPSY, FDG PET study of the brain, performed for the evaluation of refractory epilepsy which is being evaluated for surgery.
surgery) MELANOMA		
Melanoma	61553	MELANOMA, Whole body FDG PET study, following initial therapy, performed for the evaluation of suspected metastatic or recurrent malignant
NEUROENDOCRINE	01003	melanoma in patients considered suitable for active therapy.
DOTA (Ga ⁶⁸) for evaluation of NETs	616/-7	[™] Ga - DOTA, Whole body PET study if:
BOTA (our) for evaluation of the 13	01047	a) a gastro-entero-pancreatic neuroendocrine tumour is suspected on the basis of biochemical evidence with negative or equivocal conventional imaging; or b) both (i) a surgical amenable gastro-entero-pancreatic neuroendocrine tumour has been identified on the basis of conventional techniques; and (ii) the study is for excluding additional disease sites.
OTHER		, , , , , , , , , , , , , , , , , , ,
Rare and uncommon cancer	61612	Rare and uncommon cancer, Whole body FDG PET study for the initial of eligible cancer types, for a patient who is considered suitable for active
		therapy, if: a) the eligible cancer type is: (i) a rare or uncommon cancer (less than 12 cases per 100,000 persons per year); and (ii) a typically FDG avid cancer; and b) there is at least a 10% likelihood that the PET study result will inform a significant change in management for the patient Applicable once per cancer diagnosis

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