

BREAST REFERRAL



radiology SA

Patient Details

Name

DOB

Address

Phone

Medicare No.

Request For

- Mammography
- +/- Ultrasound
- +/- Biopsy
- Biopsy:
 - Ultrasound
 - Stereotactic
- Localisation:
 - Hookwire
 - Carbon
 - Site Clip
 - Node Clip
- Nuclear Medicine Sentinel Node
- CT Chest
- CT Abdomen
- CT _____
- Nuclear Medicine Bone Scan
- Rebatale MRI - complete tick box below
- Non Rebatale MRI
- PET - complete tick box below

Clinical Details

If contrast is required, recent eGFR _____

Referring Doctor Details

Signature

Copies To

Date

Results Tel _____ Fax _____

MEDICARE CLINICAL INDICATIONS

MRI BREAST

- (63487) Involved nodes with unknown breast primary.
- (63531) Indeterminate breast lesion on conventional imaging, and biopsy is not possible.
- (63533) Discrepancy in tumor extent on conventional imaging and clinical examination, and MRI may alter treatment planning.
- (63547) Breast implants with anaplastic large cell lymphoma.
- (63467) 12 month follow up scan for an abnormality found on a 63464 scan

(63464) Eligibility once every 12 months. Age <60, asymptomatic, and at high risk of cancer due to one or more of the following:

- Genetic mutation with high breast cancer risk in self or first degree relative
- Both:
 - a. One 1st or 2nd degree relative with breast cancer <45 yrs and
 - b. Another 1st or 2nd degree relative in same side of family with bone or soft tissue sarcoma <45 yrs
- Personal history of breast cancer <50yrs
- Personal history of mantle radiation therapy
- Personal lifetime risk >30% or 10 year absolute risk >5% using the Tyrer-Cuzick (IBIS Risk Evaluator) algorithm v8 or later.

BREAST SPECIALIST RADIOLOGISTS

Dr Buraundi
Dr Compton
Dr Connolly
Dr Cooper
Dr Croser
Dr Faithfull
Dr Hall
Dr Saloniklis
Dr Wilks

NUCLEAR SPECIALISTS

Dr Averbuj
Dr Chew
Dr Connolly
Dr Cooper
Dr El-Barhoun
Dr Hall
Dr Pearce

PET / CT BREAST

***All eligible PET Scans are BULK BILLED**

- (61524) Requested by Specialist for locally advanced (stage 3) breast cancer considering active therapy
- (61525) Requested by Specialist for suspected local or metastatic breast cancer considering active therapy

BOOK YOUR APPOINTMENT



Phone: (08) 8402 0200
Fax: (08) 8402 0247
Email: radiologysa@radiologysa.com.au
Scan: QR code and follow the prompts

Location: _____

Date: _____

Time: _____

LOCATIONS & SERVICES

For bookings and appointments please contact clinics below

	Mammography	Ultrasound	Stereotactic	CT Multislice	Nuclear Medicine	Breast MRI	PET Scan
<input type="checkbox"/> Calvary Central Districts Hospital 25-37 Jarvis Road, Elizabeth Vale T: (08) 8402 0202 F: (08) 8402 0210	✓	✓		✓	✓	✓	✓
<input type="checkbox"/> Calvary North Adelaide Hospital 89 Strangways Terrace, North Adelaide T: (08) 8402 0262 F: (08) 8402 0272	✓	✓	✓	✓	✓		
<input type="checkbox"/> Campbelltown Clinic 511 Lower North East Road, Campbelltown T: (08) 8402 0212 F: (08) 8402 0220	✓	✓		✓			
<input type="checkbox"/> Flinders Private Hospital Suite 206, 1 Flinders Drive, Bedford Park T: (08) 8402 0298 F: (08) 8402 0267	✓	✓	✓	✓			
<input type="checkbox"/> Marion Medical Centre 199 Sturt Road, Seacombe Gardens T: (08) 8402 0235 F: (08) 8402 0236	✓	✓		✓			
<input type="checkbox"/> Port Adelaide Clinic 268-280 Commercial Road, Port Adelaide T: (08) 8402 0223 F: (08) 8402 0229	✓	✓		✓			
<input type="checkbox"/> Stirling Hospital 20 Milan Terrace, Stirling T: (08) 8402 0233 F: (08) 8402 0239	✓	✓		✓			
<input type="checkbox"/> Victoria Park – Dulwich 170 Fullarton Road, Dulwich (opposite Victoria Park racecourse) T: (08) 8402 0299 F: (08) 8402 0297	✓	✓		✓		✓	

PATIENT PREPARATION

Patient preparation details will be confirmed at the time of booking the appointment.

The patient preparations listed below can be used as a general guide.

Mammography:

Do not use talcum powder or deodorant on the day of your appointment. Please wear a two-piece outfit.

Ultrasound:

No preparation is required.

MRI:

No preparation is required. At your appointment you will be asked to complete a safety questionnaire to ensure you are eligible to be scanned.

Nuclear Medicine:

If preparation is required details will be available when making your appointment.

PET PATIENT PREPARATION

The following instructions are for F18 FDG imaging.

Dietary Requirements:

Fast for 6 hours prior to your appointment. This is very strict. You can only drink plain water. Don't chew on chewing gum or eat breath mints. *If you are diabetic, please discuss this with us when making your appointment*.

Come well hydrated and drink 500mL of water prior to your appointment.

Exercise:

Avoid any strenuous exercise for 24 hours prior to your appointment. This includes strenuous activities such as gardening and house cleaning.

Smoking:

You must not smoke on the day of your appointment.

Medications:

Take your medications as normal

please speak with staff about diabetic medications.

Time:

Arrive 15 minutes prior to your appointment.

The procedure will involve an injection followed by a 1 hour resting period. The scan will take 30 minutes.

Allow up to 3 hours in the department for the entire process.

Claustrophobia:

Please discuss this with us prior to your appointment. The PET scanner is similar to a CT scanner.

Family are unable to remain with you during the resting period or while you have your scan.

Clothing:

Please wear loose, comfortable and warm clothing. Avoid zips, metal studs, clips etc. Leave all jewellery at home.

Confirmation:

You should expect a phone call the day prior to confirm your appointment.

Last minute cancellations within 24 hours may result in a fee to cover the costs of the pre-ordered isotope.

Your doctor has recommended that you use Radiology SA. You may choose another provider however it is important to discuss with your doctor first.