

PATIENT DETAILS

Name* _____ **DOB*** _____

Address* _____

Contact Number* _____ Workers Comp

Medicare Number _____ Third Party

EXAMINATION REQUESTED

Erect Supine

Cervical Spine: **A.P** Lumbar Spine: **A.P (incl. Pelvis)**

Cervical Spine: **A.P Open Mouth** Lumbar Spine: **A.P**

Cervical Spine: **Oblique** Lumbar Spine: **Lateral (Neutral)**

Cervical Spine: **Lateral (Neutral)** Lumbar Spine: **Lateral (Flex/Ext)**

Cervical Spine: **Lateral (Flex/Ext)** Lumbar Spine: **Lateral (Flex/Ext)**

Thoracic : **A.P** Lumbar Spine: **Oblique**

Thoracic : **Lateral** Pelvis: **Pelvis**

Non Referred / No Rebate Items

X-Ray (Other):

Ultrasound:

Other:

AREA TO BE EXAMINED & CLINICAL NOTES

Allergies _____ Urgent Pregnant: YES NO

For IV contrast exams, recent creatinine level / eGFR: _____

REFERRER DETAILS

Name* _____ **Specialty*** _____

Address* _____ **Provider Number*** _____

Contact Number* _____ **Fax Number:** _____

**Must be completed*

Signature* _____ **Date*** _____

Pregnant: YES / NO

All reports and images are available electronically. Please tick below for your additional requests. Referral Pads Required

REPORTS Urgent Results Fax Download Phone Film Copy reports to:



CONTACT DETAILS

- 📍 20 Park Avenue
PO Box 1224
Coffs Harbour NSW 2450
- ☎️ (02) 6691 7800
- 📠 (02) 6691 7822
- ✉️ bookings@beachrad.com.au
- ✉️ **MRI BOOKINGS:**
mribookings@beachrad.com.au
- 🌐 Monday to Friday
8.30am - 5.00pm
Closed weekends
and public holidays

ABN 33 657 027 391

OTHER SERVICES

- **General X-Ray**
- **Fluoroscopy / Screening**
- **OPG / Dental**
- **Cone Beam CT**
- **MRI**
- **CT (low dose)**
- **Ultrasound**
 - General
 - Obstetrics / Gynaecology
 - Musculoskeletal
 - Vascular
 - Doppler
- **Interventional Procedures**
- **Echocardiography**
- **FNA & Core Biopsy**
- **3D Mammography**
- **Bone Mineral Density**

Your doctor has recommended you use Beachside Radiology. You may choose another provider but please discuss this with your doctor first.



PLEASE BRING ANY PREVIOUS IMAGES AND REPORTS

www.beachrad.com.au • bookings@beachrad.com.au • (02) 6691 7800