



Patient's Name: _____

Address: _____

Phone: _____

LMP: _____

EDC: _____

Clinical Notes: _____

IMAGING REQUEST

- Consultation/Second Opinion
- First Trimester/Dating
- Nuchal Translucency Screening 11+2-13+6 weeks first trimester screening & consultation
MBS indication: risk for fetal abnormalty _____
- CVS/Amniocentesis
- 18-20 Weeks/Morphology
- Third Trimester/Growth & Wellbeing
MBS indication: eg. clinical suspicion of IUGR _____
- Gynaecological
- Sonohysterogram
- HyCoSy Tubal Patency Assessment
- Detailed Deep Endometriosis Scan (requires fleet enema - see back for details)
- Insertion of MIRENA IUCD with consult and pelvic scan (see back for details)

REFERRING DOCTOR

Signature: _____

Provider No: _____ Date: _____

REPORT:

- Urgent
- Phone
- Fax
- Argus
- Healthlink

PREPARATION FOR ULTRASOUND EXAMINATIONS

- For obstetric and gynaecologic examinations, empty your bladder 1 hour prior to your appointment. Then drink 2 glasses of water in the next ½ hour - do not empty your bladder until after your ultrasound.
- GYNAECOLOGICAL EXAMINATION - please try to book in first half of cycle.
- The service of MIRENA IUCD insertion is offered if this has been decided on after discussion with your doctor. You will need to bring the IUCD to the appointment. A consultation with our doctor is necessary on the day to discuss the procedure and we will perform ultrasound to check the device placement.
- DEEP ENDOMETRIOSIS SCREEN - examines for evidence of endometriosis in the bowel, bladder and vagina which helps to plan surgery. Please purchase a "fleet enema" from your chemist and take this approximately two hours before your appointment.

Please bring this form to your appointment along with any previous scans or results.

