

Cardiac Imaging Request



Patient Details

Name

Address

DOB

Phone

Medicare Number

CTCA with specialist consultation

- ☐ **57360** (once in a 5 year period)

For a patient not known to have coronary artery disease who:

- (i) Has stable or acute symptoms consistent with coronary ischaemia; and
- (ii) Is at low to intermediate risk of an acute coronary event, including having no significant cardiac biomarker elevation and no electrocardiogram changes indicating acute ischaemia.

- ☐ **57364**

At least one of the following apply to the patient:

- (i) Stable symptoms and newly recognised left ventricular systolic dysfunction of unknown aetiology;
- (ii) The exclusion of coronary artery anomaly or fistula;
- (iii) The patient will be undergoing non-coronary cardiac surgery;
- (iv) Assess patency of bypass graft.

- ☐ **Non-rebatable CTCA**

- ☐ **Calcium Score**

Screening tool to stratify risk for asymptomatic adults >45 years

- ☐ **Echocardiography**

- ☐ **Exercise Stress Test**

Cardiac MRI

Medicare coverage varies depending on indication(s);

you may select >1 indication (tick indication/s) where appropriate.

- ☐ **63385** Aorta/Great vessel
- ☐ **63388** Thrombus/Tumour/Mass
- ☐ **63390** Myocarditis:
 - (i) acute onset heart failure caused by suspected myocarditis;
 - (ii) unexplained arrhythmia caused by suspected myocarditis;
 - (iii) suspected drug-induced myocarditis.
- ☐ **63391** Congenital Heart Disease abnormality of thoracic aorta
- ☐ **63395** ARVC
Symptoms or Investigations consistent with ARVC
- ☐ **63397** ARVC
Asymptomatic and 1 first degree relative with ARVC

NON-MEDICARE ELIGIBLE (fees apply)

- ☐ Cardiomyopathy
- ☐ Viability/Ischaemia
- ☐ Other: _____

Nuclear Medicine

- ☐ Myocardial Perfusion Scan

All 3 items below need to be affirmed to meet Medicare Eligibility:

- ☐ No MPS claimed in the previous 24 months
- ☐ Symptoms of cardiac ischemia
- ☐ Not suitable for exercise or echocardiography

Clinical Details

Referrer Details

Name

Provider Number

Address

Signature

Date

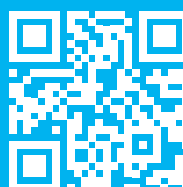
Noosaville Medical & Professional Centre

P: 07 5440 9700

E: info@noosaradiology.com.au

F: 07 5440 9777

W: www.noosaradiology.com.au



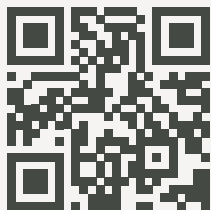
Please bring this form, your medicare card & relevant imaging with you.
Your doctor has recommended that you use Noosa Radiology.
You may choose another provider but please discuss this with your doctor first.

Noosaville Medical & Professional Centre

90 Goodchap Street, Noosaville QLD 4566

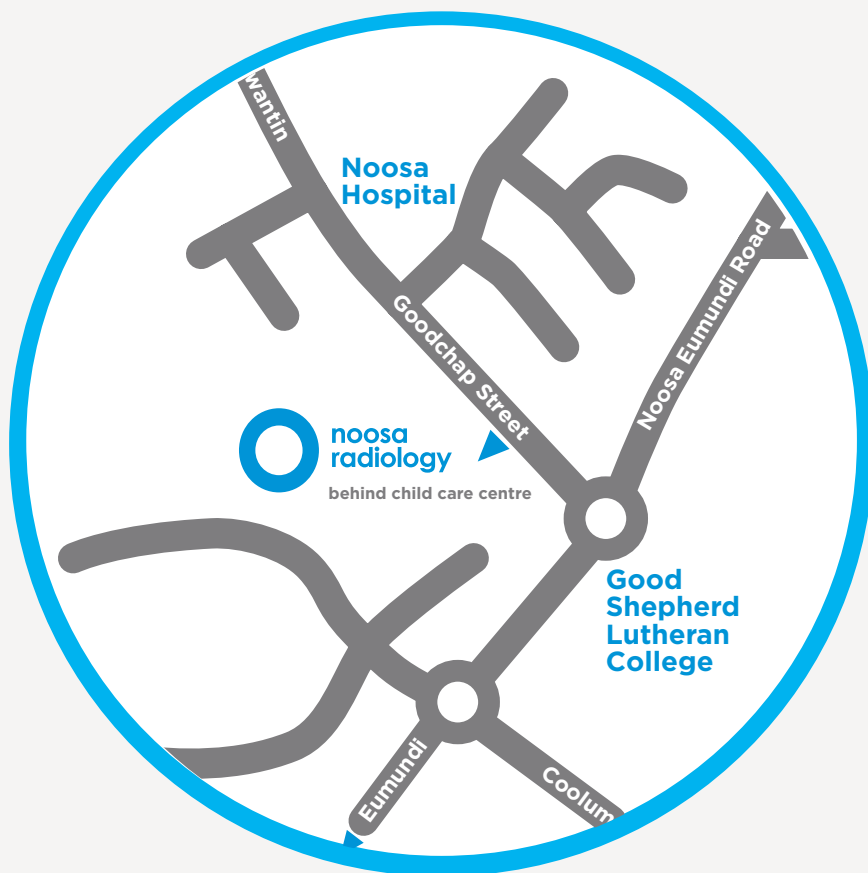
P: 07 5440 9700
F: 07 5440 9777

E: info@noosaradiology.com.au
W: www.noosaradiology.com.au



Office Hours

Monday	8am - 5:30pm
Tuesday	8am - 5:30pm
Wednesday	8am - 5:30pm
Thursday	8am - 5:30pm
Friday	8am - 5:30pm
Saturday	9am - 12pm



coolum radiology

Coolum Park Shopping Centre
14/21 South Coolum Road
Coolum Beach QLD 4573
P: 07 5238 8533
www.coolumradiology.com.au

Office Hours

Monday	8am - 5pm
Tuesday	8am - 5pm
Wednesday	8am - 5pm
Thursday	8am - 5pm
Friday	8am - 5pm

Directions



cooroy radiology

34 Maple Street, Cooroy QLD 4563
P: 07 5454 7844
W: www.cooroy-radiology.com.au

Office Hours

Monday	8am - 5pm
Tuesday	8am - 5pm
Wednesday	8am - 5pm
Thursday	8am - 5pm
Friday	8am - 5pm

Directions



gympie radiology

71 Channon Street, Gympie QLD 4570
P: 07 5489 0800
W: www.gympieradiology.com.au

Office Hours

Monday	8am - 5:30pm
Tuesday	8am - 5:30pm
Wednesday	8am - 5:30pm
Thursday	8am - 5:30pm
Friday	8am - 5:30pm

Directions

