I-MED Radiology Network

Comprehensive care. Uncompromising quality.

Book your appointment online

Coffs Harbour **T** 02 6648 2700
Mater Imaging **T** 02 9955 4599
Miranda **T** 02 8522 4000
Wagga Wagga **T** 02 6932 1300

PET Imaging Request

Patient Identification

Surname: .....

First name: .....

Date of Birth: ... / ... / .....

Address: .....

.....

Phone No: (h) .....

(m) .....

(w) .....

Or ID Sticker

PET scan results required by: ... / ... / .....

Patient Information

• Patient status at present ◯ OP **or** ◯ IP

If IP, where? .....

.....

.....

.....

• Diabetic ◯ No ◯ IDDM ◯ NIDDM

• Is patient claustrophobic? ◯ Yes **or** ◯ No

Referring Consultant/Specialist

(Must be Specialist Referred for MC Rebate)

Doctor's name: ..... Provider No: .....

Phone contact: ..... Signature: ... / ... / .....
Date

Address for Films & Report: .....

.....

Fax (if required): .....

Tracer

◯ FDG

◯ PSMA

◯ DOTA-TATE

◯ FET

◯ NaF

◯ Other

Clinical Indication

◯ Staging ◯ Restaging

Site of disease ..... Histopath .....

Clinical details .....

.....

.....

.....

Additional Diagnostic Imaging Required

◯ CT Area: .....

◯ MRI .....

◯ Other (please specify modality and region e.g. Ultrasound pelvis) .....

Recent Correlative Imaging (Please attach results)

◯ CT Date/where: .....

◯ MRI Date/where: .....

Please ensure patient brings films with them for their appointment.

Recent biopsy/scope (Please attach results)

◯ Biopsy Date/where: .....

◯ Scope Date/where: .....

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

Medicare rebatable indications

Alzheimer's Disease **Effective 1 November 2021**

- ◯ Performed for diagnosis if clinical evaluation of the patient by a specialist, or in consultation with a specialist, is equivocal, and the patient has not had this service performed for diagnosis or management in the previous 12months. Applicable not more than 3 times per lifetime.

Breast

- ◯ Whole body 18F-FDG PET study performed for the staging of locally advanced (Stage III) breast cancer in a patient considered potentially suitable for active therapy.
- ◯ Whole body 18F-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.

Lymphoma

- ◯ Initial staging of newly diagnosed or previously untreated Hodgkin's or non-Hodgkin's lymphoma.
- ◯ 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.
- ◯ Restaging following confirmation of recurrence of Hodgkin's or non-Hodgkin's lymphoma.
- ◯ Assess response to second-line chemotherapy when stem cell transplantation is being considered, for Hodgkin's or non-Hodgkin's lymphoma.

Brain

- ◯ 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 therapy.

Head and neck

- ◯ Staging of biopsy-proven newly diagnosed or recurrent head and neck cancer.
- ◯ Evaluation of patients with suspected residual head and neck cancer after definitive treatment, and who are suitable for active therapy.

Metastatic SCC unknown primary

- ◯ Evaluation of metastatic squamous cell carcinoma of unknown primary site involving cervical nodes.

Lung

- ◯ 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.
- ◯ Staging of proven non-small cell lung cancer, where curative surgery or radiotherapy is planned.

Upper GIT

- ◯ Staging of proven oesophageal or GOJ carcinoma, in patients considered suitable for active therapy.

Lower GIT

- ◯ Evaluation (following initial therapy) of suspected residual, metastatic or recurrent colorectal carcinoma in patients considered suitable for active therapy.

Gynaecological

- ◯ Primary staging of patients with histologically proven carcinoma of the uterine cervix, at FIGO stage IB2 or greater, prior to planned radical radiation therapy or combined modality therapy with curative intent.
- ◯ Staging of patients with confirmed local recurrence of carcinoma of the uterine cervix considered suitable for salvage pelvic chemoradiotherapy or pelvic exenteration with curative intent.
- ◯ Evaluation (following initial therapy) of suspected residual, metastatic or recurrent ovarian carcinoma in patients considered suitable for active therapy.

Melanoma

- ◯ Evaluation (following initial therapy) of suspected metastatic or recurrent malignant melanoma in patients considered suitable for active therapy.

Sarcoma

- ◯ Initial staging of patients with biopsy-proven bone or soft tissue sarcoma (excluding gastrointestinal stromal tumour) considered by conventional staging to be potentially curable.
- ◯ 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.

DOTA-TATE **Whole body Ga-DOTA-peptide PET study**

- ◯ Staging of a suspected gastro-entero-pancreatic (GEP) neuroendocrine tumour.
- ◯ Assessment of resectability of metastatic GEP neuroendocrine tumour.

MEDICARE NON-REBATABLE INDICATIONS

- ◯ PSMA (Prostate Ca)
- ◯ Brain FET-PET for primary or metastatic disease
- ◯ Lung SCLC (Note: NSCLC funded)
- ◯ Gastric (Note: GOJ funded)
- ◯ Liver/Biliary tree (Note: Liver covered if part of funded test eg CRC)
- ◯ Pancreas
- ◯ GIST (Note: All other sarcoma funded)
- ◯ Endometrium
- ◯ Metastatic unknown Primary (Note: Metastatic SCC with cervical node funded)
- ◯ Myeloma
- ◯ Other: .....