I-MED Radiology Network
Comprehensive care. Uncompromising quality.

Imaging Request

NATIONAL LUNG CANCER SCREENING PROGRAM

The low dose CT (LDCT) scan is fully funded under Medicare however your doctor may charge a consultation fee for the request and any follow up required.

PATIENT DETAILS

Patient Name: _____ Date of birth: _____

Address: _____ Telephone (H): _____

_____ Med. No.: _____

CLINICAL INFORMATION

◯ **This patient meets the eligibility criteria of the National Lung Cancer Screening Program**

Type of screening test:

◯ **2 yearly scan:** New participant **OR** ◯ Participant returning for two-year scan

OR

◯ **Interval scan** to monitor previous findings (1,2,3, 6 or 12 month interval scan as determined in previous NLCSP LDCT report)

◯ **Any Previous Chest CT** (if known) Date: _____ Radiology provider/location: (If known) _____

◯ **Family history of lung cancer in a first-degree relatives** (only required for first/baseline LDCT)
(First-degree relatives include parents, siblings or children)

◯ **History of any cancer** (if yes, provide details) _____

Additional clinical / other notes, if required _____

_____

_____

REFERRING DOCTOR DETAILS:

Name: _____ Provider number: _____

Address: _____ Phone: _____

_____ Fax: _____

Doctor's Signature: _____ Date: _____

Send copy to: _____

Find your closest clinic or book online at **book.i-med.com.au**

Your personal information, including results of low dose CT scans and other CT imaging completed for the purposes of screening as part of the NLCSP, may be shared between your treating healthcare providers for the purposes of the NLCSP. For example, if you attend different radiology providers for your first low-dose CT scan and your second low-dose CT scan, the first radiology provider may disclose your low-dose CT images to the second radiology provider to facilitate comparison of the results of the two low-dose CT scans. By participating in the NLCSP, you consent to the use of your personal information by healthcare providers, specialists and radiologists, for the purposes of the program, and the disclosure and collection of your personal information between healthcare providers, specialists and radiologists for the purposes of the program.