

PATIENT DETAILS

Name

Phone

Medicare

Address

D.O.B

Sex

Pregnant

Please select the service required

☐ OPG - Trauma, Infection, Congential, Surgical, Tumors

☐ Ceph/Lat

☐ OPG - Impacted Teeth, Periodontal, Caries

☐ Ceph/PA

☐ OPG - Missing, Crowded, Abnormal Teeth, Orthodontic check

☐ Bone Age

☐ OPG - TMJ Arthrosis or Dysfunction

CT DENTAL SCAN (Please Select)

☐ Maxilla

☐ Mandible

☐ Both

☐ Include sinuses

CLINICAL DETAILS

For assessment of Dentition or as otherwise stated.

18	17	16	15	14	13	12	11	21	22	23	24	25	26	27	28
48	47	46	45	44	43	42	41	31	32	33	34	35	36	37	38

REFERRER DETAILS

Practitioner Name

Practice Address

Provider Number

IMAGES

☐ IntelViewer

☐ CD

Signature

Date

Copies to

## Appointment Preparation

Your preparation for your appointment is important. Any specific requirements will be discussed when making your appointment.

## Services



Magnetic  
Resonance  
Imaging (MRI)



Computed  
Tomography  
(CT Scan)



Ultrasound



Digital X-Ray



Dental Scans



Interventional  
Procedures

## Imaging Provider

Your doctor has recommended that you use Radius Imaging, you may choose another provider but please discuss this with your doctor first.

## Wauru Ponds

158 Colac Road  
Highton Victoria 3216

Mon - Fri: 8,30am - 5,30pm

Free On-Site Parking

## Services Offered

- MRI
- CT Scan
- Ultrasound
- Digital X-Ray
- Dental Imaging
- Interventional Procedures

## Lara

3-5 Forest Road South  
Lara Victoria 3212

Mon - Fri: 9,00am - 5,00pm

Free On-Site Parking

## Services Offered

- Ultrasound
- Digital X-Ray
- Dental Imaging

