



Local • Service • Independent • Quality

Patient Details

Name Date of Birth
 Address Telephone (H)
Telephone (B)
Medicare No.

Referred For:

Clinical Details:

Referring Doctor Details

Patient Category

- W/Comp Vet/Aff
- Bulk Bill
- Third Party

Results

- Deliver Fax Report
- Films & Report return with patient

Copies to:

Doctors Signature

Date

SERVICES

- General Xray
- Ultrasound
- CT Scanning
- Musculo-Skeletal Imaging
- Vascular Doppler Ultrasound
- Mammography
- Dental Xray
- Special XRay Procedures
- MRI
- CT Guided Biopsies & Injections
- Ultrasound Guided Biopsies & Injections

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PLEASE BRING PREVIOUS FILMS FOR COMPARISON