



Medicare Rebatable MRI request for Pelvis and Abdomen

Radiologists

Dr Ramesh Cuganesan
Dr Chee Chung Hiew
Dr Anthony Kaplan
Dr Elizabeth Lazarus
Dr Robert Lim
Dr Sarah Morris
Dr Daniel Moses
Dr Glen Schlaphoff
Dr Jason Wenderoth
Dr Laughlin Dawes
Dr Melvin Wong
Dr Dean Rabinowitz
Dr Dang Lam
Dr Paul Leong
Dr Maria Moon
Dr Dinesh Gooneratne
Dr Rebecca Hall
Dr Ryan Rudolph
Dr Joanne Chambers
Dr Jeanette Taylor
Dr Sophie Thomas
Dr Kevin Tay
Dr Jules Catt
Dr Yehia El Hgar
Dr Shady Osman
Dr Hao Xiang
Dr Chandira Annabattula
Dr Bryan Barry
Dr Daniel Selim
Dr Ross Copping
Dr Mitchell Sutton
Dr Anthony Logaraj

Services

X-Ray
CT
CT Angiography
MRI - 1.5 T, 3 T
Ultrasound
Doppler Ultrasound
Musculoskeletal Ultrasound
DEXA/BMD
Biopsies and Injections
3 Foot Film
Body Composition
Nuclear Medicine
Advanced Interventional Radiology
Cardiac Imaging
CT Coronary Angiogram
Cardiac MRI
Calcium Score
TAVI
MIBI
Prostate MRI
Women's Imaging
3D Mammography/Tomosynthesis
Breast Ultrasound
Breast MRI
MRI guided Breast Biopsies
Ultrasound Guided Breast Biopsies
Stereotactic Breast Biopsies
Obstetric Ultrasound
NIPT Package
Nuchal Translucency
Gynaecology / Pelvic Ultrasound
Specialist Dental Imaging
OPG
Cone Beam CT
Lateral Ceph
CT Dentascan
MRI TMJ's
Paediatric Imaging
Sports Imaging

Patient details

MRI Enterography

Medicare Eligible scan (please indicate which criteria met)

- Evaluation of disease extent at time of initial diagnosis of Crohn's disease.
- Evaluation of exacerbation/suspected complications of known Crohn's disease.
- Evaluation of known or suspected Crohn's disease in pregnancy.
- Assessment of change to therapy in patients with small bowel Crohn's disease.
This can only be claimed once in a 12 month period.

Non - Medicare eligible scan

MRI Pelvis

Medicare Eligible scan (please indicate which criteria met)

- Evaluation of pelvic sepsis and fistulas associated with established or suspected Crohn's disease.
- Assessment of change to therapy of pelvis sepsis and fistulas from Crohn's disease..
This can only be claimed once in a 12 month period.
- The request for scan identifies that the indication is for the initial staging of rectal cancer (including cancer of the rectosigmoid and anorectum).

Non - Medicare eligible scan

Clinical Notes

Referring Doctor		* These sections MUST be completed
Name:	Provider no:	
	Speciality:	
	Phone:	
Address:		
Signature:	Date:	



Spectrum

medical imaging

www.spectrumradiology.com.au

Alexandria

Shop 2, 540 Botany Road, Alexandria NSW 2015

Ph 9197 8000 Fax 9197 8079

- MRI, CT, U/S, X-RAY, OPG
- Open Mon-Fri 8:00 - 5:00pm



Liverpool

Ground & First Floors, 171 Bigge Street, Liverpool NSW 2170

Ph 9197 8100 Fax 9197 8119

- MRI, CT, U/S, X-RAY, OPG, 3D MAMMOGRAPHY, CONE BEAM CT, DEXA
- Open Mon-Fri 8:00 - 5:30pm and Sat 8:00 - 12:00pm

Sydney South West Private Hospital

Level 1, Suite 1-5, 24-40 Bigge Street Liverpool NSW 2170

Ph: 9197 8100 Fax: 02 9197 8169

- INTERVENTIONAL RADIOLOGY, MRI, CT, U/S, X-RAY
- Open Mon-Fri 8:00 - 5:30pm

Randwick (High St)

Wales Medical Centre, Level 1, 66 High Street, Randwick NSW 2031

Ph 9197 8000 Fax 9197 8019

- MRI, CT, U/S, X-RAY, OPG, CONE BEAM CT
- Open Mon-Fri 8:00 - 5:30pm and Sat 8:00 - 12:00pm

Randwick (Silver St)

Ground Floor, 13-15 Silver Street, Randwick NSW 2031

Ph 9197 8000 Fax 9197 8029

- 3T MRI, U/S, 3D MAMMOGRAPHY, NUCLEAR MEDICINE, DEXA, BODY COMPOSITION
- Open Mon-Fri 8:00 - 5:30pm

