

Spectrum cardiac imaging



PATIENT INFORMATION

Website: www.spectrumradiology.com.au

NAME:	D.O.B.	MOBILE:
ADDRESS:		HOME/WORK:
GENERAL PRACTITIONER:		MEDICARE NUMBER:
CARDIOLOGIST (if not referring Specialist)		

EXAMINATION REQUESTED:

Structural Cardiac CT Request Form

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TAVI Workup

CT Workup for TAVI: 57364

(including coronary artery imaging)

- Undergoing non-coronary cardiac surgery

AND

CT Chest, Abdomen and Pelvis: 56807

- To assess vascular access and exclude pathology prior to surgery

☐ OPG

☐ Carotid Doppler Ultrasound

Please state maximum dose of metoprolol to be given in the department: (tick one)

☐ 0 mg

☐ 25 mg

☐ 50 mg

Please state maximum dose of GTN to be given in the department: (tick one)

☐ 0 mcg

☐ 400 mcg

☐

Other Imaging

Other Valvular Planning CT including coronary arteries (57364):

☐ Mitral

☐ Tricuspid

☐ Pulmonary

Cardiac Chambers CT:

☐ Include coronary arteries (57364) ☐ Without coronary arteries (56307)

☐ Left atrial appendage closure

☐ AF ablation/PVI

☐ Cardiac Mass

Other:

CLINICAL HISTORY:

PRECAUTIONS

Please inform us at the time of booking if any of the below boxes are ticked, as the scan may not be possible.

☐ Atrial fibrillation / High grade ectopy

☐ Advanced heart block

☐ Contraindication to Beta Blockers

☐ Pacemaker

☐ Claustrophobia

☐ Weight >120kg

☐ Impaired renal function

ALLERGIES

☐ Iodine

☐ Other: _____

PRETREATED WITH BETA BLOCKERS

☐ Yes

☐ No

RISK FACTORS

☐ Family History

☐ Hypertension

☐ <60

☐ Diabetes

☐ Hyperlipidaemia

☐ Smoker

CURRENT MEDICATIONS

☐ Beta Blocker

☐ Amiodarone

☐ Digoxin

☐ Other

☐ Antiarrhythmic Calcium channel blocker

Referring Doctor

This sections **MUST** be completed.