PET imaging request

PET/CT available at City West Level 3, 18 North Terrace, Adelaide

For bookings telephone 8115 9600, fax 8115 9699, email citywest@bensonradiology.com.au

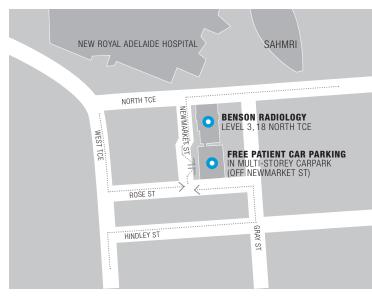


Appointment details					
Time	Date				
Patient details					
Name	DOB				
Address	Weight (kg) Height (cm)				
	Telephone (H)				
Diabetic Yes No IDDM NIDDM	Telephone (M)				
Claustrophobic Yes No	Clinical trial Yes No				
Clinical indication					
Primary site of the disease					
Recent surgical/biopsy details					
Recent chemotherapy	Date				
Recent radiotherapy	Date and region				
Date (or approximate date) of follow up with specialist	Date				
Additional clinical information					
Additional diagnostic imaging required					
☐ In addition to PET/CT, a full diagnostic CT Region	MRI Region				
☐ Other	+/- U/S guided cannulation if required				
Recent correlative imaging					
CT Date Imaging provider	Relevant findings				
MRI Date Imaging provider					
Other Date Imaging provider					
Referrer details (must be specialist referred for a Medicare rebate)					
Doctor's name	Provider number Facsimile				
Telephone					
Address					
Signature	Date				



Free patient parking on level 3 of 18A, the multistorey carpark directly behind our building (enter off Newmarket St)

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Staging/diagnosis		Restaging or surveillance		
	BREAST Whole body FDG PET study for the staging of locally advanced (Stage III) breast cancer in a patient considered suitable for active therapy		BREAST Whole body FDG PET study for evaluation of suspected metastatic or recurrent breast carcinoma in a patient considered suitable for active therapy	
	SOLITARY PULMONARY NODULE Whole body FDG PET study, performed for evaluation of a solitary pulmonary nodule where the lesion is considered unsuitable for transthoracic fine needle aspiration biopsy, or for which an attempt at pathological characterisation has failed		COLORECTAL CARCINOMA Whole body FDG PET study, following initial therapy, for the evaluation of suspected residual, metastatic or recurrent colorectal carcinoma in patients considered suitable for active therapy	
	NON-SMALL CELL LUNG CANCER Whole body FDG PET study, performed for the staging of proven non-small cell lung cancer, where curative surgery or radiotherapy is planned		MELANOMA Whole body FDG PET study, following initial therapy, performed for the evaluation of suspected metastatic or recurrent malignant melanoma in patients considered suitable for active therapy	
	MELANOMA Whole body FDG PET study, following initial therapy, performed for the evaluation of suspected metastatic or recurrent malignant melanoma in patients considered suitable for active therapy		OVARIAN CANCER Whole body FDG PET study, following initial therapy, performed for the evaluation of suspected residual, metastatic or recurrent ovarian carcinoma in patients considered suitable for active therapy	
	CERVIX Whole body FDG PET study, for the further primary staging of patients with histologically proven carcinoma of the uterine cervix, at FIGO stage IB2 or greater by conventional staging, prior to planned radical radiation therapy or combined modality therapy with curative intent		HEAD & NECK RESTAGING Whole body FDG PET study performed for the evaluation of patients with suspected residual head and neck cancer after definitive treatment, and who are suitable for active therapy	
	OESOPHAGEAL AND JUNCTIONAL GASTRIC Whole body FDG PET study, performed for the staging of proven oesophageal or GEJ carcinoma, in patients considered suitable for active therapy		HEAD & NECK RECURRENCE Whole body FDG PET study performed for the staging of biopsy-proven newly diagnosed or recurrent head and neck cancer	
	HEAD & NECK Whole body FDG PET study performed for the staging of biopsy-proven newly diagnosed or recurrent head and neck cancer		LYMPHOMA RESPONSE Whole body FDG PET study to assess response to first line therapy either during treatment or within three months of completing definitive first line treatment for Hodgkin's or non-Hodgkin's lymphoma	
	SQUAMOUS CELL CARCINOMA NECK NODES Whole body FDG PET study performed for the evaluation of metastatic squamous cell carcinoma of unknown primary site involving cervical nodes		LYMPHOMA RECURRENCE Whole body FDG PET study for restaging following confirmation of recurrence of Hodgkin's or non-Hodgkin's lymphoma	
	LYMPHOMA: HODGKIN'S OR NON-HODGKIN'S Whole body FDG PET study for the initial staging of newly diagnosed or previously untreated Hodgkin's or non-Hodgkin's lymphoma		LYMPHOMA PRE TRANSPLANT Whole body FDG PET study to assess response to second-line chemotherapy when stem cell transplantation is being considered, for Hodgkin's or non-Hodgkin's lymphoma	
	SARCOMA Whole body FDG PET study for initial staging of patients with biopsy-proven bone or soft tissue sarcoma (excluding gastrointestinal stromal tumour) considered by conventional staging to be potentially curable		CERVIX Whole body FDG PET study, for the further staging of patients with confirmed local recurrence of carcinoma of the uterine cervix considered suitable for salvage pelvic chemoradiotherapy or pelvic exenteration with curative intent	
	EPILEPSY FDG PET study of the brain, performed for the evaluation of refractory epilepsy which is being evaluated for surgery		BRAIN TUMOUR FDG PET study of the brain for evaluation of suspected residual or recurrent malignant brain tumour based on anatomical imaging findings, after definitive therapy (or during ongoing chemotherapy) in patients who are considered suitable for further active therapy	
	BRAIN FDG PET for the diagnosis of Alzheimer Disease (limit 1 per year, 3 per lifetime)		SARCOMA Whole body FDG PET study for the evaluation of patients with suspected residual or recurrent sarcoma (excluding gastrointestinal stromal tumour) after the initial course of definitive therapy to determine suitability for subsequent therapy with curative intent	
	PSMA Whole body PSMA PET for staging of intermediate to high-risk prostate adenocarcinoma for a previously untreated patient. Maximum one service per lifetime. + diagnostic CT abdo/pelvis		PSMA Whole body PSMA PET for restaging of recurrent prostate adenocarcinoma for a patient that has undergone prior therapy (PSA increase of 2ng/mL after radiotherapy, failure of PSA to fall to undetectable levels, rising PSA after radical prostatectomy). Maximum two services per lifetime.	
	+ diagnostic of abdo/peivis		+ diagnostic CT abdo/pelvis	
	RARE AND UNCOMMON CANCERS Whole body FDG PET study for the initial staging of eligible* rare cancer types for a patient who is considered suitable for active therapy. Applicable once per cancer diagnosis. * To review eligible cancers please visit bensonradiology.com.au/rarecancers			
Non-Medicare eligible indications				
OTHER: Please specify				