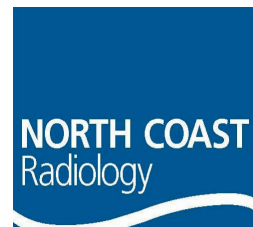


Multiparametric Prostate Referral

Serving our local community since 1974



PATIENT

Name Phone

Date of birth Gender F M Medicare No.

Address

Email address

1300 669 729

REQUEST Prostate - item 63541 Restricted to once in a 12 month period.

Multiparametric Magnetic Resonance Imaging scan of the prostate for the detection of cancer. The patient is suspected of developing prostate cancer, due to one of the following:

- A digital rectal examination which is suspicious for prostate cancer; or
- In a person under 70 years, at least two prostate specific antigen (PSA) tests performed within an interval of 3 months are greater than 3.0 ng/ml, and the free/total PSA ratio is less than 25% or the repeat PSA exceeds 5.5 ng/ml; or
- In a person under 70 years, whose risk of developing prostate cancer based on relevant family history is at least double the average risk, at least two PSA tests performed within an interval of 1- 3 months are greater than 2.0 ng/ml, and the free/total PSA ratio is less than 25%; or
- In a person 70 years or older, at least two PSA tests performed within an interval of 1- 3 months are greater than 5.5ng/ml and the free/total PSA ratio is less than 25%.

REQUEST Prostate- item 63543 Not applicable for the purposes of treatment planning Prostate - item 63543 or for monitoring after treatment of prostate cancer.

Multiparametric Magnetic Resonance Imaging scan of the prostate for the assessment of cancer:

- the patient is under active surveillance following a confirmed diagnosis of prostate cancer by biopsy histopathology; and
- the patient is not planning or undergoing treatment for prostate cancer.

For any particular patient, items 63543 is applicable:

- A) at the time of diagnosis of prostate cancer; and B) 12 months following diagnosis; and
- C) every third year thereafter; or D) at any time if there is clinical concern from the specialist requesting the service.

LISMORE
St Vincents Hospital
20 Dalley St
Fax. 02 6622 2691
stvincents@ncrad.com

Information about the scan

1. There may be a non rebatable fee.
2. Patient needs to purchase Microlax from Chemist. Go to www.microlax.com.au/faq for more information.
3. Fast 6hrs prior to appointment. Can drink water to stay hydrated.
4. Fill in questionnaires whilst waiting.
5. MRI technologist will advise patient when to insert Microlax at appointment.
6. Patient to lay on the bed on their side outside MRI until they need to go to the toilet (Empty bowel)
7. Have the scan. During the scan Gadolinium will be administered.
8. Patient will present back to reception for billing.

CLINICAL

If renal impairment, recent eGFR=

MRI CHECKLIST	Yes	No	Details	Please complete to assist with booking
Pacemaker / Heart Valves				
Aneurysm Clips				
Cochlear / Ear Implants				
Metallic foreign body to eye				
Other metallic/electronic devices				
Are you pregnant?				

DOCTOR

Name Provider Number

Address

Date Phone Films

Email

Copy to

NCR are committed to sustainability. All images are available digitally

PATIENT

Please call patient to arrange appointment

Patient will call

[ZED Information](#)

Appointment Date:

Time:

[Images & report when complete \(ZED\)](#)

Preparation:

INTERNAL USE ONLY

Patient ID

Accession #

Please bring this form, Medicare and concessional cards to your appointment along with any previous relevant films. Your medical practitioner has recommended you use NCR or CVI for quality imaging. You may choose another provider but please discuss this with your medical practitioner first.

www.ncrg.com.au

[Pathways Information](#)

[Results \(InteleConnect\)](#)