

Bulk Billing*

Kurri Kurri Opening Soon

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PATIENT DETAILS

EXAMINATION REQUIRED

CLINICAL NOTES

REFERRER DETAILS

SHOULDER ULTRASOUND

- Assess tendon / Muscle
- Rotator cuff tear /
Tendinosis / Calcification
- Biceps Subluxation
- Capsulitis / Bursitis
- Mass / Ganglion
- Occult #
- AC joint

KNEE ULTRASOUND

- Tendon / Bursae
- Meniscal tear, baker's cyst mass
OR pseudomass
- Nerve entrapment / Tumour
- Collateral ligament injury

For IV contrast, recent Creatinine level eGFR

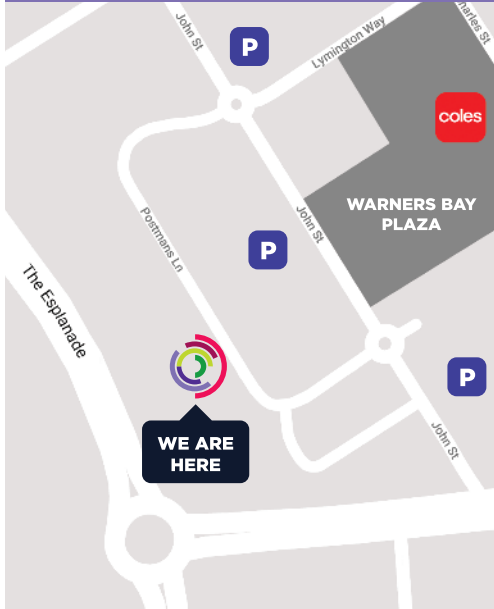
Signature:

OPENING HOURS MON - FRI: 8AM - 5PM

WARNERS BAY

9/472 The Esplanade,
Warners Bay NSW 2282

Fax: 4915 7476



BELMONT

545 Pacific Highway,
Belmont NSW 2280

Fax: 4945 0718



CESSNOCK

1 Cessnock Street,
Cessnock NSW 2325

Fax: 4013 5088



YOUR APPOINTMENT DETAILS

Time: _____ Date: _____

Preparation: _____

OUR SERVICES

	Warners Bay	Belmont	Cessnock
MRI			●
X-ray	●	●	●
Ultrasound	●	●	●
CT (Including Angiogram)	●	●	●
CT Colonography			●
CT Calcium Score		●	
Bone Density		●	●
OPG/Dental	●	●	●
Guided US Injections	●	●	●
Guided CT Injections	●	●	●
Biopsies	●	●	●

***Most Medicare eligible services BULK BILLED (excluding core biopsy)**