

Dr Uday Ahluwalia Dr Kushlan Aluwihare Dr Miguel Bardon Dr Fraser Bates

Dr Phil Bobby Dr Graeme Goldin Dr Saurabh Khandelwal Dr Sean Khoury Dr Michael Lannan

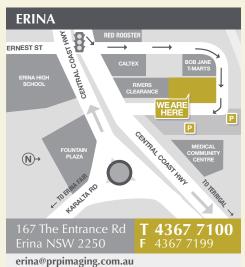
Dr Gordon Melville Dr Shane Morony

Dr Shane Moron Dr Fred Nasser Dr James Rogers Dr Andrew Stuart Dr Grace Tai Dr Tung Vu Dr John Woods and partners

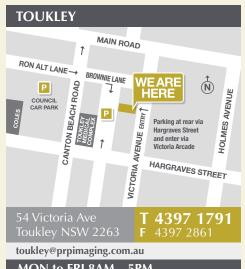
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CENTRAL COAS	Т	UROLOGY REQUEST FORM				
ERINA 167 The Entrance Road Erina NSW 2250 T 4367 7100 F 4367 7199		Patient Name:  Date of Birth:				
GOSFORD  43 William Street Gosford NSW 2250 T 4331 7050 F 4322 8483		Reason for Request:				
		☐ CT Regi	on:			
NORTH GOSFORD Gosford Private Hospital Jarrett Street North Gosford NSW 2250 T 4324 0006		Ultrasound Regi	on:			
		☐ Nuclear Medicine Regi	on:	Available at PRP Nth Gosford Tuggerah, Toukley & Woy Wo		
TOUKLEY 54 Victoria Avenu Toukley NSW 22 T 4397 1791 F 4397 2861		mpMRI Prostate (MBS 63541 – Diagnostic) (suspicious DRE, or two PSA >3.0ng/ml 1-3 months apart and free/total PSA ratio < 25% or repeat PSA exceeds 5.5ng/ml (patient < 70) or two PSA > 5.5 ng/ml 1-3 months apart and free/total PSA ratio < 25% (patient over 70 years))				
TUGGERAH 154–156 Pacific Tuggerah NSW 2 T 4355 4790 F 4355 4789		or repeat PSA exceeds 5.5ng/ml (patient < 70) or two PSA > 5.5 ng/ml 1-3 months apart and free/total PSA ratio < 25% (patient over 70 years))  mpMRI Prostate (MBS 63543 – Active Surveillance) (confirmed diagnosis of Prostate Ca by biopsy histopathology and patient not planning nor undergoing treatment) Note: only applicable to patients who have not had rebateable mpMRI Prostate and are placed on Active Surveillance; or 12 months following diagnosis and then every 3rd year thereafter, or at any time if there is concern clinically or with PSA progression  mpMRI Prostate (non-rebateable)				
WOY WOY 12–14 Blackwall Road Woy Woy NSW 2256 T 4341 3500 F 4341 3522		mpMRI Prostate (non-reb	ateable)	Available a		
		(Includes diagnostic CT head, neck, chest, abdomen and pelvis)				
Prostate MI PSMA PET o available PRP Gosfo William S	only at ord	Comments:				
			Signature:			
Your Doctor has recon you use PRP Diagnosti Imaging. You may choo another provider but p discuss with your Doc	ic ose Ilease		Date:			
PLEASE BRING	PLEASE BRING PREVIOUS FILMS FOR COMPARISON					
☐ Phone Report			СС	Request for PRP on-line		
☐ Fax Report ☐ Email Report ☐ More Request Pads		Dr	images			

## YOUR APPOINTMENT DETAILS

Time:	Date:		
Preparation:	Dute.	SCAN THIS QR CODE TO REQUEST AN APPOINTMENT ONLINE	



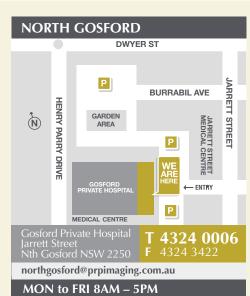


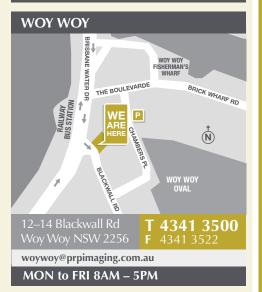












SERVICE	AVAILABLE AT
CT	All PRP Central Coast practices
Ultrasound	All PRP Central Coast practices
Nuclear Medicine	PRP North Gosford, Tuggerah, Toukley, Woy Woy
MRI Prostate	PRP Gosford only
PSMA PET	PRP Gosford only
PET Scan	PRP Gosford only