



apex
RADIOLOGY

PET & Diagnostic CT Referral

South West Health Campus

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Patient Details

Name:
Address:
DOB: / / Contact no:
Medicare: Exp Date: /

Inpatient
Ward

Please Tick:
 Vet Affairs
 HCC / Pension
 MVIT
 Medicare

With Diagnostic CT (Contract CT) FDG PET Other (Non Rebateable)
 CAP NCAP Region:

- | | | | |
|---|-------|--|-------|
| <input type="checkbox"/> Solitary Pulmonary Nodule | 61523 | <input type="checkbox"/> Head and Neck Cancer | 61598 |
| <input type="checkbox"/> PET for Stage III Breast Cancer | 61524 | <input type="checkbox"/> Head and Neck Cancer - <i>residual</i> | 61604 |
| <input type="checkbox"/> PET for Metastatic Breast - <i>carcinoma</i> | 61525 | <input type="checkbox"/> Squamous Cell Carcinoma - <i>metastatic</i> | 61610 |
| <input type="checkbox"/> Non-Small Cell Lung Cancer | 61529 | <input type="checkbox"/> Lymphoma - <i>initial staging</i> | 61620 |
| <input type="checkbox"/> Colorectal carcinoma | 61541 | <input type="checkbox"/> Lymphoma - <i>therapy response</i> | 61622 |
| <input type="checkbox"/> Melanoma | 61553 | <input type="checkbox"/> Lymphoma - <i>restaging</i> | 61628 |
| <input type="checkbox"/> Epilepsy | 61559 | <input type="checkbox"/> Lymphoma - <i>post chemotherapy</i> | 61632 |
| <input type="checkbox"/> Ovarian carcinoma | 61565 | <input type="checkbox"/> Bone / Soft Tissue Sarcoma | 61640 |
| <input type="checkbox"/> Uterine / Cervical carcinoma | 61571 | <input type="checkbox"/> Sarcoma - <i>residual / recurrent</i> | 61646 |
| <input type="checkbox"/> Uterine / Cervical carcinoma | 61575 | <input type="checkbox"/> Whole body 68Ga DOTA peptide PET study | 61647 |
| <input type="checkbox"/> Oesophageal (GEJ) carcinoma | 61577 | <input type="checkbox"/> PSMA - <i>Initial staging</i> | 61563 |
| <input type="checkbox"/> Alzheimer's | 61560 | <input type="checkbox"/> PSMA - <i>Restaging</i> | 61564 |

RELEVANT HISTORY:

Referring Doctor

Provider No: Date:
Copies of reports to: 1 Signature:
2 Print Name:

PAYMENT IS REQUIRED AT TIME OF CONSULTATION

"Your doctor has recommended that you use Apex Radiology. You may choose another provider but please discuss this with your doctor first."



A Referrer's Guide to PET/CT Rebateable Items

Medicare Eligible Items as Listed in the MBS

Solitary Pulmonary Nodule (61523)

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.

PET Stage III Breast Cancer (61524)

The patient is referred by a consultant physician, performed for the staging of locally advanced (Stage III) breast cancer in a patient considered potentially suitable for active therapy. PET for metastatic, or suspected locally or regionally recurrent, breast carcinoma (61525) The patient is referred by a consultant physician, performed for the evaluation of suspected metastatic or suspected locally or regionally recurrent breast carcinoma in a patient considered suitable for active therapy.

Non-Small Cell Lung Cancer (61529)

Whole body FDG PET study, performed for the staging of proven non-small cell lung cancer, where curative surgery or radiotherapy is planned.

Colorectal Carcinoma (61541)

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.

Melanoma (61553)

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.

Epilepsy (61559)

FDG PET study of the brain performed for the evaluation of refractory epilepsy which is being evaluated for surgery.

Ovarian Carcinoma (61565)

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.

Uterine/Cervical Carcinoma (61571)

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.

Uterine/Cervical Carcinoma (61575)

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.

Oesophageal (GEJ) Carcinoma (61577)

Whole body FDG PET study, performed for the staging or proven oesophageal or GEJ carcinoma, in patients considered suitable for active therapy.

Head and Neck Cancer (61598)

Whole body FDG PET study, performed for the staging of biopsy-proven newly diagnosed or recurrent head and neck cancer.

Head and Neck Cancer Residual (61604)

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.

Alzheimer's (61560)

FDG PET study of the brain, performed for the diagnosis of Alzheimer's disease.

Squamous Cell Carcinoma Metastatic (61610)

Whole body FDG PET study, performed for the evaluation of metastatic squamous cell carcinoma of unknown primary site involving cervical nodes.

Lymphoma - initial staging (61620)

Whole body FDG PET study, for the initial staging of newly diagnosed or previously untreated Hodgkin's or non-Hodgkin's lymphoma.

Lymphoma - Therapy Response (61622)

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.

Lymphoma - Restaging (61628)

Whole body FDG PET study to assess response to second-line chemotherapy if haemopoietic stem cell transplantation is being considered for Hodgkin or non-Hodgkin lymphoma.

Lymphoma - Post Chemotherapy (61632)

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 (excluding indolent non-Hodgkin's lymphoma).

Bone/Soft Tissue Sarcoma (61640)

Whole body FDG PET study for initial staging of patients with biopsy-proven bone or soft tissue sarcoma (excluding gastrointestinal stromal tumor) considered by conventional staging to be potentially curable.

Sarcoma - Residual / Recurrent (61646)

Whole body FDG PET study for the evaluation of patients with suspected residual or recurrent sarcoma (excluding gastrointestinal stromal tumor) after the initial course of definitive therapy to determine suitability for subsequent therapy with curative intent.

Whole body 68Ga DOTA peptide PET study (61647)

(including any associated computed tomography scans for anatomic localisation and attenuation correction), if:

- A. a gastro entero pancreatic neuroendocrine tumour is suspected on the basis of biochemical evidence with negative or equivocal conventional imaging; or
- B. both:
 - a. a surgically amenable gastro entero pancreatic neuroendocrine tumour has been identified on the basis of conventional techniques; and
 - b. the study is for excluding additional disease sites.

PSMA, Initial staging (61563)

Whole body PSMA PET study performed for the initial staging of intermediate to high-risk prostate adenocarcinoma, for a previously untreated patient who is considered suitable for locoregional therapy with curative intent. Limited to one per lifetime.

PSMA, Restaging (61564)

Whole body PSMA PET study performed for the restaging of recurrent prostate adenocarcinoma, for a patient who has undergone prior locoregional therapy and is considered suitable for further locoregional therapy to determine appropriate therapeutic pathways and timing of treatment initiation. Medicare benefits are payable for a maximum of two services in the patient's lifetime.

NOTE: Whole body PSMA PET study items 61563 and 61564 are not to be used for surveillance nor for assessment of patients with suspected (as opposed to confirmed) prostate adenocarcinoma or disease recurrence