



Vascular Ultrasound Request

Shop 20, 1 Lakeside Road Eastwood, NSW 2122. Phone: 02 9858 4888 Fax:02 9804 6216

Exam Type:

- | <input type="checkbox"/> ABI | Resting / Stress |
|--|------------------|
| <input type="checkbox"/> LOWER LIMB ARTERIAL | R / L |
| <input type="checkbox"/> LOWER LIMB VENOUS DUPLEX (DVT) | R / L |
| <input type="checkbox"/> LOWER LIMB VENOUS INSUFFICIENCY | R / L |
| <input type="checkbox"/> LOWER LIMB BYPASS GRAFT | R / L |
| <input type="checkbox"/> BILATERAL CAROTID ARTERY DUPLEX | |
| <input type="checkbox"/> UPPER LIMB VENOUS DUPLEX | R / L |
| <input type="checkbox"/> UPPER LIMB ARTERIAL DUPLEX | R / L |
| <input type="checkbox"/> VEIN MAPPING UPPER/LOWER LIMB | R / L |
| <input type="checkbox"/> PSEUDOANEURYSM | |
| <input type="checkbox"/> ARTERIO-VENOUS FISTULA | |
| <input type="checkbox"/> MESENTERIC ARTERIAL DUPLEX (fasting from midnight) | |
| <input type="checkbox"/> RENAL ARTERY DUPLEX (fasting from midnight) | |
| <input type="checkbox"/> AORTIOILIAC ARTERIES/AAA scan (fasting from midnight) | |
| <input type="checkbox"/> IVC +ILIAC VEINS (fasting from midnight) | |

Patient name: _____ D.O.B.: _____

Relevant history: _____

Diabetic on insulin or oral hypoglycaemic Consultation required

Referring Dr: _____ Request Date: _____

Provider number: _____

Phone: _____ Fax: _____

Or doctor's stamp:

Please fax this request form to us after appointment is scheduled



Vascular Ultrasound Request

Please call (02) 9858 4888 to schedule appointment.

Opening hours: 9am to 5pm, Monday to Friday.

Please confirm patient preparation with our staff when scheduling the appointment

Appointment Date: _____ Time: _____

Preparation: _____

Location:



Directions:

We are in the building opposite the post office on Progress Avenue, level 2 of Eastwood Village Shopping square.

By car: Council parking available 50m from clinic

By train: 200m (2 minute) walk from Eastwood train station – through Progress Avenue

By bus: All buses to Eastwood station.

我們位於Eastwood Village Shopping Square 2樓（郵局斜對面的建築）。

汽車：開車來時可以停在市政府停車場，距診所約50米。

乘火車：於Eastwood火車站下車後，步行約200米（2分鐘）由Progress Avenue到診所。乘

公共車：可以乘坐任意經達Eastwood火車站的公共車，並按照上文所敘的路線到達診所。

Please fax this request form to us after appointment is scheduled