

## RADIOLOGY REQUEST

### Radiology use only

DATE: .....

TIME: .....

## FAST TRACK X-RAY

For residents of Aged Care Homes only

### PATIENT DETAILS

Name: .....

D.O.B. .... UR (if known): .....

Name & address of Aged Care Home:  
.....  
.....

Phone: ..... Fax: .....

### Examination Required:

### Clinical Notes:

GP Signature: ..... Date: .. / .. / ..

### REQUESTING DOCTOR

Name: ..... Prov. No.: .....

Address: .....

Ph/Mob: ..... Fax: .....

#### **COPY TO:**

Aged Care Home: (see name & address above) .....

Ph: ..... Fax: .....

# AUSTIN FAST TRACK X-RAY

## 1. This Radiology Service is **ONLY** for

- residents of aged care homes
  - ❖ who require ambulance transport
  - ❖ whose clinical situation is non-urgent
  - ❖ who are expected to return to aged care home for further management
  - ❖ who require X-ray (NOT CT scans or ultrasounds)

## 2. How to access this service

- Book a non-urgent ambulance Ph: 1300 366 313 Fax: 1300 366 314
- COMPLETE and FAX **Austin Fast Track Radiology Notification and Patient Registration Form** to Austin ED on Fax 9496 3572
- COMPLETE this **Fast Track X-ray request form**. Send both this form **and** the Notification and Patient Registration form with the resident.

## 3. Location of service

**Enter Austin Hospital from Burgundy Street via ED triage**

