



J W NUCLEAR MEDICINE SMITHFIELD

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MB.BS (Syd) MD FRACP

PATIENT DETAILS

NAME

DATE

ADDRESS

D.O.B.

CLINICAL NOTES

EXAMINATION REQUIRED

BONE SCAN

HEPATOBILIARY SCAN

MYOCARDIAL PERFUSION (SESTAMIBI)

RENAL SCAN

GATED HEART POOL SCAN

PARATHYROID SCAN

LUNG SCAN (V/Q)

GASTRIC EMPTYING

THYROID SCAN

COLON TRANSIT

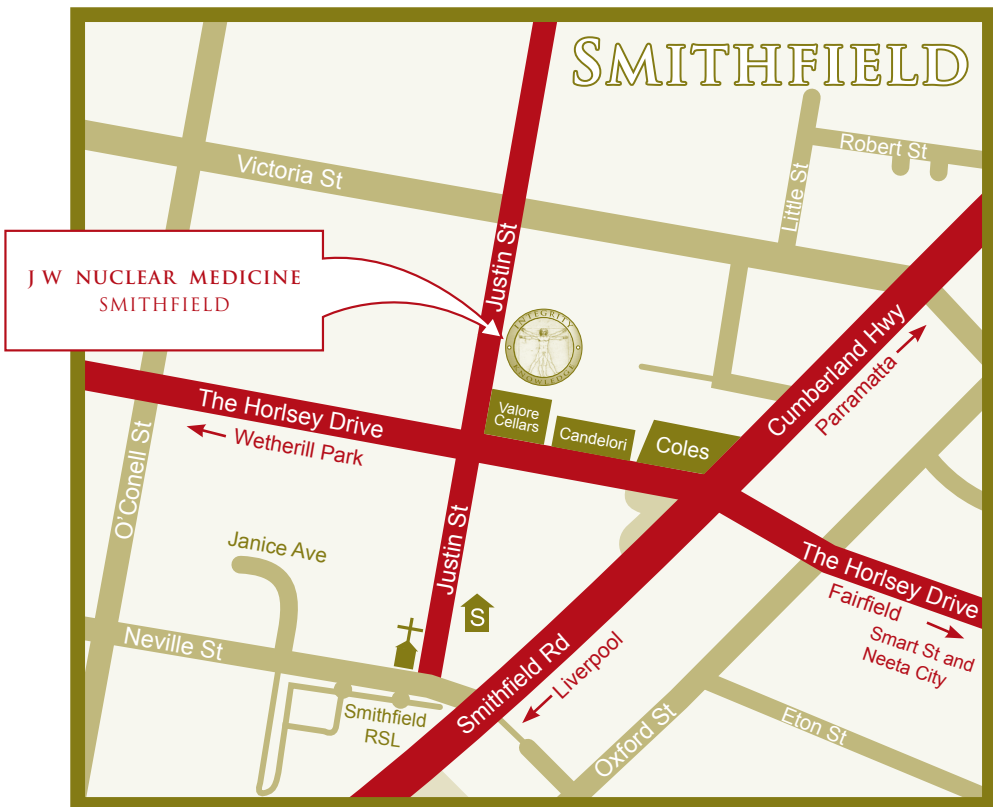
BONE DENSITOMETRY

OTHERS

REFERRING DR DETAILS

SIGNATURE

MORE REFERRAL PADS



J W NUCLEAR MEDICINE SMITHFIELD

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SMITHFIELD NSW 2164 AUSTRALIA
TELEPHONE (02) 9609 6400 FACSIMILE (02) 9604 2771



ALL PATIENTS BULKBILLED
FREE ON-SITE PARKING
MONDAY - FRIDAY 8:30AM - 5:00PM

**PLEASE BRING ANY RELEVANT
PREVIOUS X-RAYS AND SCANS**

YOUR DOCTOR HAS RECOMMENDED THAT YOU USE JW NUCLEAR MEDICINE - SMITHFIELD.
YOU MAY CHOOSE ANOTHER PROVIDER BUT PLEASE DISCUSS THIS WITH YOUR DOCTOR FIRST.