



REQUEST FOR RADIOLOGICAL INVESTIGATION

Please bring along this form AND your Identity Card / Work Pass / Social Visit / Dependant's Pass / Birth Certificate / Passport or any legal documents by Immigration Department for verification during registration.

Patient's Information				Referral Information	
Name: _____			Gender: M / F		
NRIC / FIN / Passport No: _____		Date of Birth: DD / MM / YYYY			
Contact No: _____ (HP) _____ (Home)			Date of Request: _____		
Patient's History					
Relevant History / Findings:					
<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Mandatory for Requesting Doctor to complete</div> <p>For female patients (12-55 years old):</p> <input type="checkbox"/> Patient 1 st day of Last Menstrual Period (LMP) is: _____ <small>**Radiation risk for LMP > 28 days</small> <input type="checkbox"/> I agree for patient to proceed with x-ray with patient's consent.					
Clinical Diagnosis: <input type="checkbox"/> For Treatment of chronic diseases under CDMP* <input type="checkbox"/> Screening <input type="checkbox"/> Others:					
Remarks:					
_____ MCR, Name & Signature of Requesting Doctor					
Please Specify:					
Report Collection (please tick) <input type="checkbox"/> Dispatch to clinic <input type="checkbox"/> Patient to collect		Report Type (please tick) <input type="checkbox"/> Report Only <input type="checkbox"/> Report and CD <input type="checkbox"/> Report and Films		Payment Options (please tick) <input checked="" type="checkbox"/> Patient Self-pay <input type="checkbox"/> Bill Clinic	
Please circle appropriate code number of examination (s) requested					
Code	X-Ray - Head & Neck	X533	Scaphoid Views (Right / Left)	X561	Sternum
X500	Facial Bones	X593	Both Scaphoid Views	X562	Thoracic Spine (AP & Lat) - Supine
X501	Nasal Bone - Lateral			X563	Thoracic Spine (Obliques) -Supine
X502	Internal Auditory Meatus (IAM)	Code	X-Ray - Lower Limbs	X567	Lumbosacral Spine (Flex & Ext) - Supine
X503	Lateral Neck - One Film	X534	Ankle Joint (Right/Left)	X568	Lumbosacral Spine (AP & Lat) - Supine
X505	Both Mandibles	X535	Both Ankle Joints	X569	Lumbosacral Spine (Obliques) - Supine
X506	Mastoids	X536	Femur (Right / Left)	X570	Sacrum
X507	Orbits	X537	Both Femurs	X571	Coccyx
X509	Sinuses, Paranasal	X538	Foot (Right / Left)		
X510	Skull (AP & Lat)	X539	Both Foot	Code	Ultrasound #+
X511	Temporo-mandibular Joints	X540	Toes (Right / Left)	X600	Liver / Hepatobiliary System
X512	Cervical Spine (AP & Lat)	X541	Calcaneum (Right / Left)	X601	Kidneys
X513	Cervical Spine (Obliques)	X542	Both Calcaneum	X602	Pelvis
X514	Cervical Spine (Open mouth)	X543	Both Calcanei - Lateral only	X603	Abdomen (Liver & Kidneys)
X515	Cervical Spine (Flex & Ext)	X544	Hip Joint (Right / Left)	X605	Kidneys & Bladder
		X545	Both Hip Joints	X610	Thyroid
Code	X-Ray - Upper Limbs	X546	Knee Joint (Right / Left)		
X585	Acromio-clavicular Joints	X547	Both Knee Joints Supine (AP & Lat)	Code	Screening Mammogram #+
X586	Sterno-clavicular Joints		Both Knees Joints	X572	Screening Mammogram, Non BSS
X517	Clavicle (Right / Left)	X598	AP <u>Weight-bearing</u> & Lat <u>Supine</u>	X578	Mammogram BSS - Singaporean
X518	Both Clavicles	X548	Skyline View (1 side)	X578PR	Mammogram BSS - PR
X519	Fingers (Right / Left)	X594	Both Skyline Views		
X520	Hand (Right / Left)	X550	Tibia & Fibula- Leg (Right / Left)	Code	Bone Mineral Densitometry (Dexa) +
X521	Both Hands	X551	Both Tibia & Fibula	X900	Bone Mineral Densitometry (BMD)
X522	Humerus - Arm (Right / Left)				
X523	Both Humeri	Code	X-Ray - Trunk	Code	Add on
X524	Radius & Ulna - Forearm (Right / Left)	X552	Abdomen / KUB - Supine	X573	Additional View
X525	Both Radius & Ulna	X553	Abdomen - Erect or Decubitus	X992	Film Printing (per film)
X526	Elbow Joint (Right / Left)	X555	Pelvis	X994	Copy of Report
X527	Both Elbow Joints	X556S	Chest - PA (Report only)	X993	CD Printing (per CD)
X528	Shoulder Joint (Right / Left)	X557	Chest- PA & Lateral		
X530	Both Shoulder Joints	X588	Chest- Lateral (Right / Left)	Book Appointments	
X529	Scapula (Right / Left)	X587	Chest Oblique (Right / Left)	Mammogram	Ultrasound / BMD
X589	Both Scapula	X559	Chest - Apical		
X531	Wrist Joint (Right / Left)	X590	Ribs - PA & Oblique (Right / Left)		
X532	Both Wrist Joints	X560	Sacro-iliac Joints		