

Patient Details

Mr  Mrs  Miss  Ms  Dr (please tick)

SURNAME

FIRST NAME

MIDDLE NAME

ADDRESS

TELEPHONE

home

work

mobile

DATE OF BIRTH / /

**NHI NUMBER**

\*REQUIRED

Next follow up appointment / /

ACC NUMBER

CLINICAL DETAILS

Musculoskeletal Ultrasound

- SHOULDER
- OTHER (please specify)

General Ultrasound

- ABDO/PELVIS
- UPPER ABDOMEN
- RENAL
- PELVIS
- NECK
- OTHER (please specify)

Vascular Ultrasound

- CAROTID
- DVT
- OTHER (please specify)

Interventional

- CORTISONE INJECTION
- ASPIRATION (see website)

Obstetric Ultrasound

- DATING
- NUCHAL
- ANATOMY
- GROWTH
- OTHER (please specify)

\* Please turn over for patient preparation details.

LMP:

EDD:

Report Distribution

Phone report to ( )

Fax report to ( )

EDI report to

Copy of report to

Copies to DHB  Yes  No

Referrers can access images and reports online.

Referrer Details

Name  
(please print)

Registration#

Signature

Date / /

No charge for ACC and New Zealand Resident Pregnancy Scans

Prices and booking information online at [www.advanceultrasound.co.nz](http://www.advanceultrasound.co.nz)

## Patient Preparation for Ultrasound Examinations

### Gallbladder / Upper Abdomen

Nothing to eat 4 hours before the scan and only water to drink. Continue taking your medication as normal. If you are diabetic, please check with your doctor.

### Renal / Kidney / Bladder / Prostate / Lower Abdomen

Full bladder required. For most people, this is 2 large glasses of water 30-60 minutes before the scan. If your bladder is not full 10 minutes before the scan please drink more water. If you are uncomfortably full you may let some out.

### Abdo/Pelvis (Abdomen and Pelvis)

Nothing to eat 4 hours before the scan and only water to drink.

Continue taking your medication as normal. If you are diabetic, please check with your doctor.

Full bladder required. For most people, this is 2 large glasses of water 30-60 minutes before the scan. If your bladder is not full 10 minutes before the scan, please drink more water.

If you are uncomfortably full you may let some out.

### All other examinations including female pelvis and pregnancy scans

No preparation required.

## What to bring with you to your scan

- Your referral form
- Growth chart (if you have one for pregnancy scans)
- All previous images and reports if you have them (i.e. X-ray, Ultrasound, CT or MRI)
- (Optional) USB stick for images - also available onsite for a small fee

Find out what to expect during your appointment online at [www.advanceultrasound.co.nz](http://www.advanceultrasound.co.nz)

### Botany Junction

(Next to Botany Junction Medical Centre)

110 Michael Jones Drive Flat Bush, Auckland 2016

Phone. (09) 277 4495

Fax. (09) 277 4496

Email. [botany@advanceultrasound.co.nz](mailto:botany@advanceultrasound.co.nz)

### Opening Hours

Monday - Friday 8am - 5pm

(Excluding public holidays)

Extended hours available please see website for details.

