MidlandMRI
MR IMAGING SPECIALISTS

Appointment Date	Midland MRI Use Only
	Anglesea 1 Anglesea 2 Braemar Lomas Meade Supervised Unsupervised
Appointment Time	Radiologist .....
	Appt duration .....
	Waitlist .....
	MIT .....
	Imaging Protocol .....

Anglesea Imaging Centre
11 Thackeray Street
Phone: 07 957 6050 | Fax: 07 957 6051

Braemar Hospital
Medical Services Building, 24 Ohaupo Road

Waikato Hospital
Lomas Building & Meade Clinical Centre, Pembroke Street
Phone: 07 858 0990 ext 94990 | Fax: 07 858 0991

MRI Scan Request Form

Contact Details

SURNAME

FIRST NAME(S)

Address

Phone (h)
(mob)

Email

Date of Birth

NHI

ACC approval number

Medical Insurance Company
PRIOR APPROVAL RECOMMENDED

Referring Doctor

Signature

Date

CC Results
CD to ☐ Doctor ☐ Patient

Scan Requested

- ☐ Brain
- ☐ Acoustic Protocol
- ☐ Pituitary Protocol
- ☐ MS Screen
- ☐ C Spine
- ☐ T Spine
- ☐ L Spine
- ☐ Extremity .....
- ☐ Joint .....
- ☐ Arthrogram
- ☐ Abdomen
- ☐ Liver
- ☐ MRCP
- ☐ MRE
- ☐ Pelvis
- ☐ MR Brain and Cerebral MRA
- ☐ MR Brain and Carotid and Cerebral MRA
- ☐ Cerebral MRA
- ☐ Carotid MRA
- ☐ Aortic MRA
- ☐ Renal MRA
- ☐ Peripheral MRA
- ☐ MRA other region .....
- ☐ Chest
- ☐ Breast
- ☐ Cardiac
- ☐ Other Region .....

Does your patient have:

A heart pacemaker/ICD?	☐ Yes	☐ No
Pacing leads or wires?	☐ Yes	☐ No
Cerebral aneurysm clips/coils?	☐ Yes	☐ No
Hx of Intraocular foreign bodies?	☐ Yes	☐ No
Neuro electrical stimulators?	☐ Yes	☐ No
Any metal in the body?	☐ Yes	☐ No
Renal impairment?	☐ Yes	☐ No

eGFR .....

Height .....

Weight .....

Clinical Details

ACCREDITED IANZ MEDICAL IMAGING SERVICE