

# Request form

**General Inquiries**

Sydney

Bella Vista

Bondi Junction

Burwood

St Leonards

Frenchs Forest

Kogarah

Liverpool

Newtown

**1300 557 226**

(02) 9290 2122

(02) 9629 2011

(02) 9388 0955

(02) 9745 4054

(02) 9413 9196

(02) 9154 1174

(02) 9553 9611

(02) 9822 8447

(02) 9516 2064

**Patient Details**

Date .....

Name .....

Address .....

Medicare No. ....

Ref No. ....

**Examination Required****Report**☐ Deliver to: .....☐ Phone: .....☐ Fax to: .....☐ Via EDI: .....**Reason for Examination****Copy to****Referring Doctor details**

Name .....

Provider No. ....

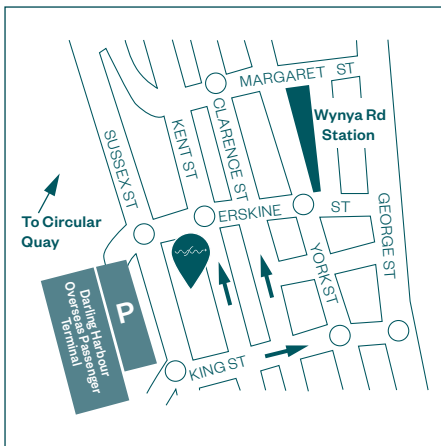
Address .....

Phone .....

Signature .....

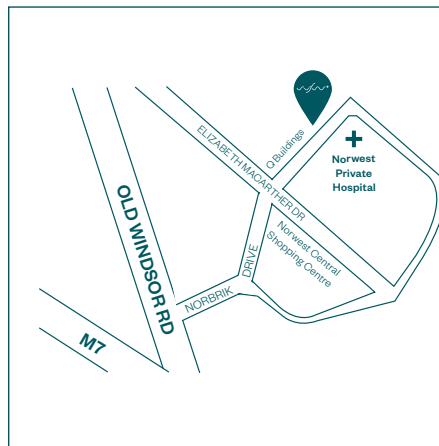
**Dr Neil Athayde****Dr Jose Garcia Flores****Dr Kathryn Graham****Dr Patricia Lai****Dr Natasha Luk****A/Prof Andrew McLennan****Dr Ritu Mogra****Dr Sumathi Rajendran****A/Prof Fergus Scott****Dr Sashi Siva****Dr Elisabeth Smet****Notes:**

- Your doctor has recommended that you use Sydney Ultrasound for Women.
- You may choose another provider but please discuss this with your doctor first.
- **For all obstetric and gynaecological examinations please advise patients to present with a full bladder.** i.e. Patients should not pass urine for 1 hour before examination, then drink 500ml of water 1 hour before the examination.
- For all Third Trimester Growth and Well Being Examinations, please drink 250mL 1 hour before.
- For some examinations a trans-vaginal scan may be the best but would only be carried out with the patients consent.



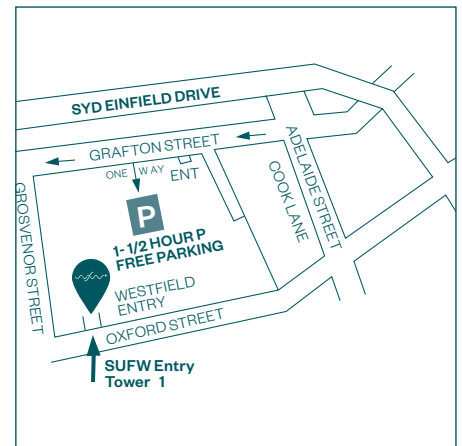
#### Sydney

Suite 6.02, Level 6  
309 Kent Street  
Sydney 2000  
T 02 9290 2122  
F 02 9290 2399  
E [sydney@sufw.com.au](mailto:sydney@sufw.com.au)



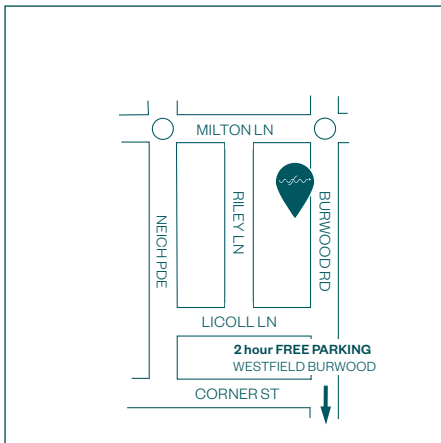
#### Bella Vista

Suite 114, Level  
110 Norbrik Drive  
Bella Vista 2153  
T 02 9629 2011  
F 02 9629 3011  
E [bellavista@sufw.com.au](mailto:bellavista@sufw.com.au)



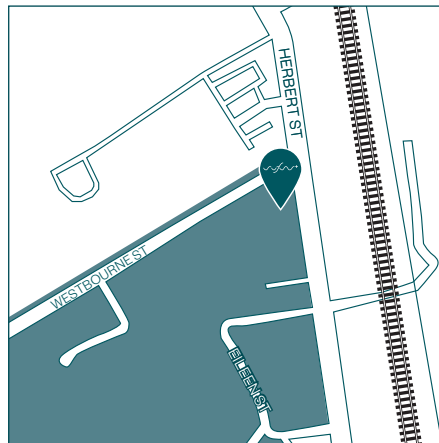
#### Bondi Junction

Suite 1705, 17th Floor, Westfield Tower 1  
520 Oxford Street  
Bondi Junction 2022  
T 02 9388 0955  
F 02 9388 0933  
E [bondijunction@sufw.com.au](mailto:bondijunction@sufw.com.au)



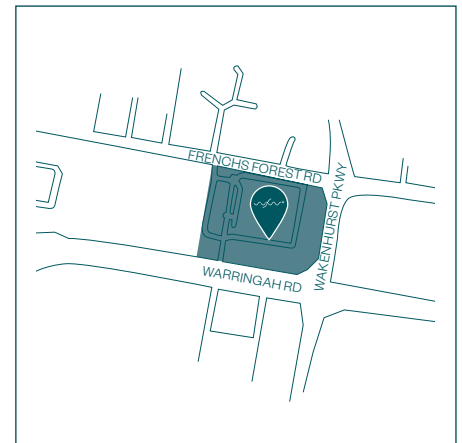
#### Burwood

Level 2, Suite 203,  
21-23 Burwood Road,  
Burwood 2134  
T 02 9745 4054  
F 02 9744 8854  
E [burwood@sufw.com.au](mailto:burwood@sufw.com.au)



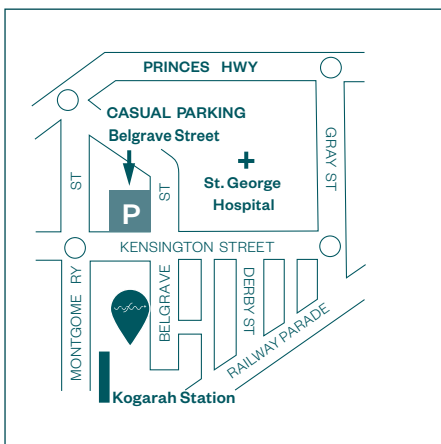
#### St Leonards

Tower A, Level 4, Suite A406,  
North Shore Health Hub  
7 Westbourne Street  
St Leonards NSW 2065  
T 02 9413 9196  
F 02 9413 3863  
E [stleonards@sufw.com.au](mailto:stleonards@sufw.com.au)



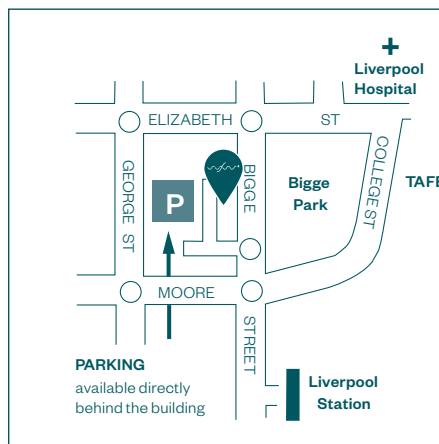
#### Frenchs Forest

Suite 5, Level 6, Northern Beaches Hospital  
105 Frenchs Forest Rd  
Frenchs Forest NSW 2086  
T 02 9154 1174  
F 02 9982 0211  
E [northernbeaches@sufw.com.au](mailto:northernbeaches@sufw.com.au)



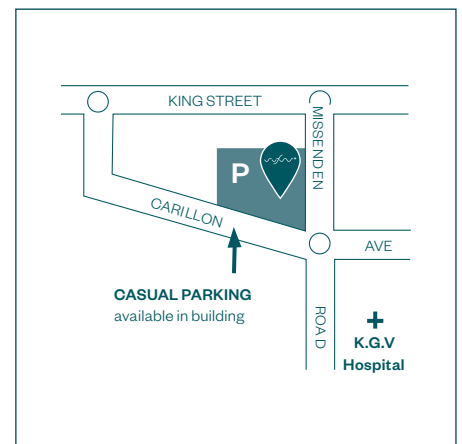
#### Kogarah

Suite 1A, Level 1  
4 Belgrave Street  
Kogarah 2217  
T 02 9553 9611  
F 02 9587 4880  
E [kogarah@sufw.com.au](mailto:kogarah@sufw.com.au)



#### Liverpool

Suite 205, 2nd Floor  
161 Bigge Street  
Liverpool 2170  
T 02 9822 8447  
F 02 9822 7761  
E [liverpool@sufw.com.au](mailto:liverpool@sufw.com.au)



#### Newtown

RPAH Medical Centre  
404/100 Carillon Ave  
Newtown 2042  
T 02 9516 2064  
F 02 9550 6257  
E [newtown@sufw.com.au](mailto:newtown@sufw.com.au)



**Sydney Ultrasound**  
For Women

## RE-ORDER FORM

**Please return this form to Sydney Ultrasound For Women via post:**

Suite 6.02, Level 6, 309 Kent Street, Sydney NSW 2000

OR by facsimile to: (02) 9413 3783

and a replacement Referral pad will be forwarded to you as per the details you provide below:

Name of Referring Doctor: .....

Mailing Address for Referral Pad: .....

**Please send:**

- ☐ A4 Referral Forms
- ☐ A5 Generic Referral Pads
- ☐ A5 Personalised Referral Pads