Department of Clinical Radiology. University Hospitals Bristol NHS Foundation Trust
RADIOLOGY REQUESTS

Referrers are required to complete sections 1-6 accurately and legibly. Inadequately completed forms will not be accepted.

1. Patient ID

Hosp No. ..... NHS No. .....
Surname .....
Forename(s) .....
Address .....
.....
.....
Postcode .....
DoB .....
Pt daytime contact nos. .....

Radiology Dept Use

Appointment: Date: ..... Time: .....

Patient ID Confirmed: .....
Operator Signature

2. Patient Type / Mobility / Requirements

IP OP ED GPSU
Mobility: Walking / Chair / Trolley / Portable
Oxygen IV drip / pump
Transport – 1 / 2 man

3. Clinical details (You are legally obliged under IR(ME)R 2000 to supply sufficient medical data for justification purposes. You MUST provide Radiology with clinical details to enable appropriate investigation and accurate report. Any relevant previous radiological examinations, surgery, radiotherapy and/or chemotherapy to be included)

CT/MR - IP/Urgent Requests must be discussed with a Radiologist

Previous Investigations

Clinical Question to be Answered:

Additional relevant information:
MRI contra-indications:
For contrast examinations: eGFR:

Bowel Prep Authorisation: Picolax® ☐ Klean Prep® ☐
Following explanation with patient by referrer on safe use of bowel cleansing solution.

4. Examination Requested: **Priority: Urgent** ☐ **Routine** ☐

5. Cautions (if none tick here) ☐ **Possibility of Pregnancy** Yes / No LMP .....

Allergy / severe asthma ☐ ? renal impairment ☐ Diabetes ☐
Previous Colorectal Surgery ☐ MI within last 6wks ☐
Infection Risk to staff/other Patients MRSA ☐ IVDU ☐ Other please specify .....
Other considerations (deaf, blind etc) .....

6. Referrer (print name) ..... **Role:**

Signature: ..... Contact No./Bleep: .....

Date of Request: ..... Copy Report to: .....

For operator/practitioner use only

Examination/procedure authorised by ..... Date .....
(Subject to decision following check on pregnancy status, if relevant)
As far as I am aware I am not pregnant: .....
Radiologist Instructions: