

## Maternity Scan Referral

### Patient Information

(Please see reverse for branch location and preparations)

First names	Surname			
<input type="checkbox"/> Previous scan	Date of birth	dd	mm	yyyy
Phone home	Phone work			
Address				
NHI No.				

### Examination Code (Please select from Section 88 Clinical Indications list)

LMP:	<input type="checkbox"/> unsure	or EDD:	<input type="checkbox"/> scan	<input type="checkbox"/> LMP
<input type="checkbox"/> UD (uterus not equal to dates)	<b>Clinical Details</b>			
<input type="checkbox"/> AN (anatomy)				
<input type="checkbox"/> NT (nuchal translucency)				
<input type="checkbox"/> GR (growth)				
<input type="checkbox"/> Other				

### Referrer Information

Emergency scan not on referral of LMC

Referrer's name (LMC) or NZMC No.				
Practice address				
Phone / Fax	Date	dd	mm	yyyy
Additional report to		Signature		

## Preparation you should undertake prior to your maternity ultrasound scan

### Early Pregnancy (prior to 11 weeks)

You must have a full bladder. Please drink 1 litre of water or juice 1 hour before your appointment. Do not empty your bladder until after your examination.

### Pregnancy (after 11 weeks)

Do not empty your bladder for 1 hour prior to your scan.

## Palmerston North Branch Location



## Contact Details

### Appointments and enquiries

T. +64 6 954 2040

F. +64 6 954 2041

### Address

33-43 Princess Street  
Palmerston North

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