

INTERVENTIONAL PROCEDURES BOOKING FORM

FNA

Instructions:

- **Cross out procedures N/A.**
- **Notes from booking form to be made on appointment booking.**
- **Booking form to be scanned with referral and worksheets.**

FNA – NECK/THYROID		Advised Pt & noted on booking? Confirm below.
Cost: \$417.40, OOP \$165.30. Medicare rebate processed on day of appointment.		
Patient Name & DOB	Pt Name	DOB
Contact Number & Appt Date	Contact No.	Appt Date
Do you have a pension or concession card?	YES (if so BB)	NO (advise costs)
Do you take blood thinners?	YES Advise to stop	NO
Have you had an US in the last 3 months? At GIG? If not, where?	YES	NO
No driving for 2-4 hours after appt. Driver required.	YES	NO

FNA – BREAST		Advised Pt & noted on booking? Confirm below.
Cost: \$372.90, OOP \$165.30. Medicare rebate processed on day of appointment.		
Patient Name & DOB	Pt Name	DOB
Contact Number & Appt Date	Contact No.	Appt Date
Do you have a pension or concession card?	YES (if so BB)	NO (advise costs)
Do you take blood thinners?	YES Advise to stop	NO
Have you had an US in the last 3 months? At GIG? If not, where?	YES	NO
No driving for 2-4 hours after appt. Driver required.	YES	NO

FNA – CYST/LUMP/BIOPSY		Advised Pt & noted on booking? Confirm below.
Cost: \$459.00, OOP \$165.30. Medicare rebate processed on day of appointment.		
Patient Name & DOB	Pt Name	DOB
Contact Number & Appt Date	Contact No.	Appt Date
Do you have a pension or concession card?	YES (if so BB)	NO (advise costs)
Do you take blood thinners?	YES Advise to stop	NO
Have you had an US in the last 3 months? At GIG? If not, where?	YES	NO
No driving for 2-4 hours after appt. Driver required.	YES	NO