



Northmed Precint
Unit 11, 3 Akoranga Drive
Northcote, Auckland 0627

Phone: 09- 419 9692

www.xrayprofessionals.co.nz

Patient Details:

First Name: _____ Surname: _____

Date of Birth: _____

Address: _____

_____ Phone: _____

NHI:

ACC#

Clinical Details

General X-ray

ACC X-ray

X-ray Descriptions: _____

Clinical Details: _____

Images available on Inteleviewer for immediate viewing

Referral Details

Referring Practitioners: _____

Address: _____ Phone: _____

Signature: _____ Date: _____

Copy of Report to: _____

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