

Radiology request form for chest x-ray for visa purposes

2021

Important notes:

This form is only applicable for members on the Ingwe Active option who require a chest X-ray for South African visa approval purposes.

A referral from a GP is not required.

This form must be accompanied by the Department of Home Affairs form.

In the event of any abnormalities detected on the X-ray, please refer the member to their Ingwe Active Primary Care Network GP.

1: Patient's details

Membership number	<input type="text"/>	Option name	<input type="text"/> I <input type="text"/> N <input type="text"/> G <input type="text"/> W <input type="text"/> E <input type="text"/> A <input type="text"/> C <input type="text"/> T <input type="text"/> I <input type="text"/> V <input type="text"/> E
Principal member's full name	<input type="text"/>		
Patient's full name	<input type="text"/>		
Dependant code	<input type="text"/>	Gender	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female
Home telephone number	<input type="text"/>	Date of birth	<input type="text"/> D <input type="text"/> D <input type="text"/> M <input type="text"/> M <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
Postal address	<input type="text"/>		Cellphone number <input type="text"/>
	<input type="text"/>		Postal code <input type="text"/>

2: Referring practice number

Please use practice number 9324823 for submission of the claim.

3: Test details

Tariff code: 30100

Description: X-ray of chest, single view

4: Tariff value for chest x-ray

Tariff value: R464