



**24HR REPORTING, SAME DAY SCHEDULING, PACS, PET/CT, CT, MRI, XRAY, DEXA**

Appointment Date: \_\_\_\_\_ Follow-up Date: \_\_\_\_\_ DICOM Media Request

Patient Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Phone: \_\_\_\_\_

Insurance: \_\_\_\_\_ Pre-Auth/Cert: \_\_\_\_\_ ICD-9: \_\_\_\_\_

Ordering Physician: \_\_\_\_\_ Phone: \_\_\_\_\_ Cc: \_\_\_\_\_

Diagnosis \_\_\_\_\_

History \_\_\_\_\_

**PRIOR RADIOLOGY STUDIES FOR COMPARISON**

Date of Study      Location      Type of Study

- 1 \_\_\_\_\_  
 2 \_\_\_\_\_

**PATIENT SAFETY CHECK**

**MRI Patients**

Does the Patient have a Pacemaker, Aneurysm Clip or metal in body?       yes  no

Has the Patient ever had metal in their eyes?  
 (if Yes, Please Order Xray Orbits w/ MRI)  
 yes  no

**MRI Contrast Patients**

Bun: \_\_\_\_\_ Creatinine: \_\_\_\_\_  
 Lab Result within 30 days are needed for patients with: Diabetes, Renal Disease, Liver Disease, Hypertension or Over the Age of 60

**Information Needed for all Patients**

Height: \_\_\_\_\_ Weight: \_\_\_\_\_  
 Is the Patient Ambulatory?       yes  no  
 Is the The Patient Diabetic?       yes  no  
 Notes: \_\_\_\_\_

**MRI**

- W/O Contrast  
 W & W/O Contrast  
 Orbits, Face, Neck  
 Brain  
 Abdomen (NPO 6hrs, water only)      Specify Structure  
 MRCP (3D) (NPO 6hrs, water only)  
 Pelvis  
 Spine  
 Cervical     Thoracic     Lumbar  
 Extremity (Non Joint)  
 Left  Right      Specify Structure  
 Extremity (Joint)  
 Left  Right      Specify Structure

**MRA** 3D Rendering

- W/O Contrast  
 W & W/O Contrast  
 Head  
 Neck (Soft Tissue)  
 Aorta/Runoff Vessels  
 Chest  
 Abdomen  
 Pelvis  
 Renal  
 Lower Extremity

**Notes\Other**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**XRAY**

- HEAD**  
 Orbits  
 Skull (3 Views)  
**SPINE**  
 C-Spine (2/3 Views)  
 C-Spine (4 Views)  
 T-Spine (3 Views)  
 L-Spine (2/3 Views)  
 L-Spine (Complete)  
**CHEST**  
 Chest (2 Views)  
**RIBS**  
 Unilateral     Left  Right  
 Unilateral + PA Chest  
 Bilateral + Chest  
**ABDOMEN**  
 KUB (1View)  
 Complete (2 Views)  
 Acute + PA Chest (3 Views)

- PELVIS**  
 Pelvis (1/2 Views)  
**HIPS**  
 Hip     Left  Right  
 Bilateral and AP  
**EXTREMITY**  
 Left     Right  
 Shoulder (2 Views)  
 Elbow (3 Views)  
 Forearm (2 Views)  
 Wrist (3 Views)  
 Hand (3 Views)  
 Knee (3 Views)  
 Tib/Fib (2 Views)  
 Ankle (3 Views)  
 Foot (3 Views)  
 Heel (2 View, calcaneus)  
 Toe(s) (2 View)  
**BONE**  
 Age  
 Met Survery (complete)

**DEXA**

Bone Density Scan

Physician Signature \_\_\_\_\_

Date \_\_\_\_\_