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Order Form (PDF version)

PATIENT NAME: PATIENT DOB:

SELF-PAY INSURANCE

PATIENT PHONE #: EMAIL:

REFERRING PHYSICIAN: NPI:

PHYSICIAN OFFICE PHONE #: PHYSICIAN OFFICE FAX #:

ATTORNEY INFO: CONTACT PERSON:

DIAGNOSIS:

PHYSICIAN SIGNATURE: DATE:

STAT-CALL WITH REPORT:

YES

REASON FOR SCAN:

- MVA Slip and Fall
WC Other:
Health Concern

MRI

HEAD

- Brain
MRA Head
MRV Head
Pituitary
IAC's
Orbits
Face/Mandible
Sinuses
TMJ

CONTRAST

- Without
With
W/ & W/O

SPINE

- Cervical
Thoracic
Lumbar
MRA Neck
Neck Soft Tissue
Sacrum/Coccyx
SI Joint
Other:

BODY/SOFT TISSUE

- Chest
Breast-Implants
Abdomen
MRCP
Pelvis
Other:

MUSCULOSKELETAL

- Shoulder L R B
Clavicle L R B
Humerus L R B
Elbow L R B
Forearm L R B
Wrist L R B
Hand/Finger L R B
Hip L R B
Femur L R B
Knee L R B
Lower Leg L R B
Ankle L R B
Foot/Toe L R B
Other:

CT

HEAD

- Brain
Face
Orbits
IAC's
Sinuses
Neck

BODY

- Chest
Abdomen
Pelvis
Extremity:

SPINE

- Cervical
Dorsal/Thoracic
Lumbar
3D Recon
CT Calcium Score (Heart Scan)
Low Dose Lung CT (Lung Cancer Screen)

ULTRASOUND

- Thyroid
Soft Tissue
Abdominal
Aorta
Breast
Gallbladder / RUQ
Renal
Scrotal Testicular
Areas of Mass:

CARDIAC & VASCULAR

- Echo (W/Doppler)
Stress Echo
Carotid
Venous r/o DVT
Upper Extremity
Lower Extremity
Arterial with ABI
ABI Only

GYN

- Pelvic-Trans-Vaginal

X-RAY

HEAD

- Skull
Orbits
Orbits for Foreign Body
Facial Bones

SPINE

- Cervical
Thoracic
Lumbar
Sacrum
SI Joint
Coccyx

CHEST

- Chest PA/LAT
Sternum
Clavicle L R B
Ribs L R B

UPPER EXTREMITY

- Shoulder L R B
Humerus L R B
Elbow L R B
Forearm L R B
Wrist L R B
Hand L R B
Finger L R B

LOWER EXTREMITY

- KUB
Pelvis
Hip L R B
Femur L R B
Knee L R B
Tibia/Fibula L R B
Ankle L R B
Foot L R B

BONE DENSITY

- Bone Density



OUR LOCATION



PREPARING FOR YOUR APPOINTMENT

- Preparing for your MRI is easy. Follow your normal routine and continue any prescribed medication unless your doctor or our office has instructed you otherwise.
- **Please arrive 30 minutes early** for your scheduled appointment. Bring all Medicare, insurance or health plan documents, subscriber number, etc.
- Normally, sedation is not necessary during the MRI exam. However, if you feel heightened anxiety when visualizing the exam, we suggest you ask your doctor for a mild tranquilizer and take it as prescribed prior to your appointment. Please bring a driver with you.

BE SURE TO TELL THE TECHNOLOGIST IF ANY OF THE FOLLOWING APPLY TO YOU:

- Have a pacemaker
- Metal fragments are in your body (cochlear implants, metal aneurysm clips, shrapnel, or other electronic implants)
- You think you may be pregnant