

**STAT** CALL REPORT TO: \_\_\_\_\_ FAX REPORT TO: \_\_\_\_\_ DELIVER:  CD  FILMS  
 Call Patient to Schedule Examination.  Give CD to Patient

Referring Physician: \_\_\_\_\_ Physician Email: \_\_\_\_\_  
 Patient Name: \_\_\_\_\_ D.O.B.: \_\_\_\_\_  
 Patient Phone: \_\_\_\_\_ Patient Email: \_\_\_\_\_  
 DIAGNOSIS/Clinical Information: \_\_\_\_\_  
 Special Instructions: \_\_\_\_\_

## MRI

- WO  W / WO  PRN Contrast
- Brain
  - Brain & Spine MS Protocol
  - IAC's
  - Orbits
  - Pituitary
  - Trigeminal Nerves
  - TMJ
  - Soft Tissue Neck
  - Brachial Plexus  L  R
  - Breast
    - Implant Rupture
  - Cervical Spine
  - Thoracic Spine
  - Lumbar Spine
  - Defacography
  - SI Joints
  - Sacral Plexus
  - MRV Head
  - MRA
    - Head (Circle of Willis)
    - Neck (Carotids)
  - Chest
  - Abdomen
  - MRCP w/Abdomen
  - Pelvis

- Enterography
- Shoulder  L  R
  - Scapula  L  R
  - Humerus  L  R
  - Elbow  L  R
  - Forearm  L  R
  - Wrist  L  R
  - Hand  L  R
  - Hip  L  R
  - Femur  L  R
  - Knee  L  R
  - Tib/Fib  L  R
  - Ankle  L  R
  - Foot  L  R

Biomet Signature

Other \_\_\_\_\_

## ULTRASOUND

ANY STUDY MAY REQUIRE DOPPLER EVALUATION AT DISCRETION OF RADIOLOGIST

- Abdomen  Ltd  Complete  Renal
- Pelvic  With Transvaginal
- Obstetrical  With Transvaginal
- Transvaginal
- Venous Doppler  L  R  Arm  Leg
- Carotid Doppler
- Arterial Duplex  L  R  Arms  Legs
- Thyroid / Neck
- Breast (Complete w/axilla)  L  R
- Screening
  - Thyroid
  - Carotid Arteries
  - Abdominal Aorta
  - Liver & Gallbladder
- Scrotal
- Biophysical Profile
- Other \_\_\_\_\_

## CT

- W  WO  W / WO  PRN Contrast
- CALL FOR PREPARATION INSTRUCTIONS
- Head
  - Orbits
  - Temporal Bone
  - Sinus
  - Max / Facial
  - Soft Tissue Neck
  - Cervical Spine
  - Thoracic Spine
  - Lumbar Spine
  - Chest
  - Chest for Lung Nodule
  - Chest for Interstitial Lung Disease
  - Abdomen (w/Pelvis if needed)
  - Abdomen & Pelvis
  - Abdomen Only
  - Pelvis Only
  - Lung Cancer Screening
  - Cardiac Calcium Score
  - Other \_\_\_\_\_

- Enterography
- Prophecy Ankle
- Inbone
  - Infinity
  - Invision

Biomet Signature

CONTRAST & ADDITIONAL VIEWS AT DISCRETION OF RADIOLOGIST

### EXTREMITIES

- Hand  L  R  Hip  L  R
- Elbow  L  R  Knee  L  R
- Wrist  L  R  Ankle  L  R
- Shoulder  L  R  Foot  L  R
- Other \_\_\_\_\_

## CTA

- W  WO  W / WO  PRN Contrast
- Chest - Aorta / Great Vessels
  - Chest - Pulmonary Veins
  - Abdomen & Pelvis
  - Abdomen - Aneurysm
  - Other \_\_\_\_\_

## ECHOCARDIOGRAPHY

- Echocardiography

## BONE DENSITOMETRY (DXA)

- Bone Densitometry (DXA)

## X-RAY

- 1-View Chest
- 2-View Chest
- Ribs  L  R
- 1-View Abdomen (KUB)
- 2-View Abdomen

### EXTREMITIES

- Finger  L  R  Pelvis  L  R
- Hand  L  R  Hip  L  R
- Wrist  L  R  Femur  L  R
- Forearm  L  R  Knee  L  R
- Elbow  L  R  Tib/Fib  L  R
- Humerus  L  R  Ankle  L  R
- Shoulder  L  R  Heel  L  R
- A-C Joints  L  R  Foot  L  R
- Clavicle  L  R  Toe  L  R
- Other \_\_\_\_\_

### HEAD

- Sinuses (Specify)
- Orbits  Skull
- Facial Bones  TMJ
- Nasal
- Other \_\_\_\_\_

### SPINE

- Soft Tissue Neck
- Cervical  LTD  Complete
- Thoracic  LTD  Complete
- Lumbar  LTD  Complete
- Flexion & Extension  SI Joints
- Sternum
- Sacrum/Coccyx
- Other \_\_\_\_\_

## PROCEDURES

- Joint Injection  Arthrogram
- Shoulder  L  R  With MRI  With CT
- Elbow  L  R  With MRI  With CT
- Wrist  L  R  With MRI  With CT
- Knee  L  R  With MRI  With CT
- Ankle  L  R  With MRI  With CT
- Hip  L  R  With MRI  With CT
- IVP \_\_\_\_\_
- Other \_\_\_\_\_