

Patient Name: _____

Call pt. to schedule Hm# _____ Wk# _____ Alt# _____

Referring Physician Name: _____

Comments/Diagnosis: _____

Appointment Date/Time: _____ (a.m.) (p.m.) Stat Verbal Fax Disk with Patient Courier Delivery

MRI SCAN

- MR Head (Brain)
- MR Cervical Spine
- MR Thoracic Spine
- MR Lumbar Spine
- MR Abdomen
- MR Pelvis
- MR Knee R L
- MR Shoulder R L
- MR TMJ
- MR IAC's
- MR Brain w/pituitary
- MR Ankle/Foot R L
- MR Orbits
- MRV _____
- MRA _____

CT SCAN

- *CT Abdomen/Pelvis
- *CT Abdomen
- *CT Pelvis
- CT Thoracic Spine(5 level)
- CT Cervical Spine
- CT Lumbar Spine
- *CT Chest
- *CT Soft Tissue Neck
- *CT Head
- CT Extremity R L
- CT Sinuses Limited Full
- CTA _____

ULTRASOUND

- Abdomen
- Aorta
- Gall Bladder
- Pelvic Transvaginal & Transabdominal
- Breast
- Scrotum
- Soft Tissue
- Thyroid
- Parathyroid
- Carotid Artery Doppler
- Venous Doppler of
- Extremities Upper R L
- Lower R L
- Graft eval w/dopp Upper R L
- Lower R L
- OB

X-RAYS HEAD

- Sinuses
- Skull
- Facial Bones
- Nasal

X-RAYS CHEST

- Chest PA/Lat
- Rib Series R L
- Sternum

X-RAYS SPINE AND PELVIS

- Cervical Spine
- Cspine Flex/Ext
- Thoracic Spine
- Lumbosacral Spine
- Sacrum Coccyx
- Scoliosis Series
- Pelvis

X-RAYS UPPER EXTREMITY

- Clavicle R L
- Shoulder R L
- Humerus R L
- Elbow R L
- Forearm R L
- Wrist R L
- Hand R L
- Fingers R L

X-RAYS LOWER EXTREMITY

- Hip R L
- Femur R L
- Knee R L
- Tibia-Fibula R L
- Ankle R L
- Foot R L
- Heel R L
- Toes R L

X-RAYS ABDOMEN

- KUB
- KUB w/ upright ABD

MAMMOGRAPHY

- Screening

GASTROINTESTINAL

- Esophagram
- Upper GI
- UGI/Small Bowel
- Barium Enema
- Small Bowel

UROLOGICAL

- IVP

NUCLEAR MEDICINE

- Bone Scan
- Three Phase Bone Scan
- MUGA
- Thyroid Uptake & Scan
- Meckel's Scan
- Gastric Emptying
- Hepatobiliary Scan
- Ventilation/Perfusion Lung Scan
- Renal Scans - Captopril/Lasix
- Liver/Spleen Scan
- Parathyroid Scan

BONE MINERAL DENSITY

- DEXA

PRECERT

- Provide clinical and insurance

COMMENTS: _____

*Denotes may need contrast

Patient Instructions and Information

Magnetic Resonance Imaging (MRI)

You cannot have an MRI performed if you have a pacemaker, aneurysm clips in the brain, ear implants, implanted neuro-stimulators or metallic fragments in one or both eyes.

You may bring plain sweatpants and a sweatshirt to change into for the exam rather than change into an exam gown.

Please inform your physician of pregnancy, breastfeeding, anemia, any disease that affects red blood cells, asthma, or other allergic respiratory disorders.

IV contrast may be used for your procedure.

Bone Mineral Density Study

(DEXA) You cannot have had a contrast study within the last 10 days.

Breast Imaging

Mammographic procedures should be scheduled during the first 10 days following the beginning of the menstrual cycle. Previous mammogram films are very important in diagnosing problems. Please have films sent to us or bring them with you at the time of your appointment. On day of examination please refrain from using deodorant.

Computed Tomography (CT)

In most cases IV contrast and/or oral contrast may be given.

Abdomen & Pelvis or Pelvis Only: Pick up prep at least one day prior to your study. If barium studies have been done in the past few days, take a laxative the night before the exam.

If diabetic, please consult with your physician.

X-ray or Diagnostic Radiology

Barium Enema or Limited Intravenous Pyelogram (IVP): Pick up prep at least 2 days prior to your study.

Upper GI & Small Bowel Series: DO NOT EAT OR DRINK ANYTHING AFTER MIDNIGHT. THIS INCLUDES WATER.

Ultrasound

Obstetrical or Pelvis: Drink 32 oz. of fluid other than milk one hour before your exam time. DO NOT EMPTY YOUR BLADDER.

Pancreas, Gallbladder, Abdomen and Liver: Eat a fat-free dinner the night before the exam consisting of only Jell-O, bouillon, and fresh fruit. DO NOT EAT OR DRINK ANYTHING SIX HOURS PRIOR TO THE EXAM.

Kidney: Nothing to eat or drink 6 hours prior to the exam.

Abdominal Aorta: Nothing to eat or drink 6 hours prior to exam.

Nuclear Medicine

Female patients age 15-45 must be in the first ten days of their menstrual cycle to have a nuclear exam unless they have had a hysterectomy or tubal ligation.

Bone Scan: Drink 32 oz. of liquids after the injection before returning for the scan.

Hepatobiliary: Nothing to eat or drink after midnight.

Thyroid Scan: No X-ray contrast or thyroid medication for 8 weeks prior to the examination.

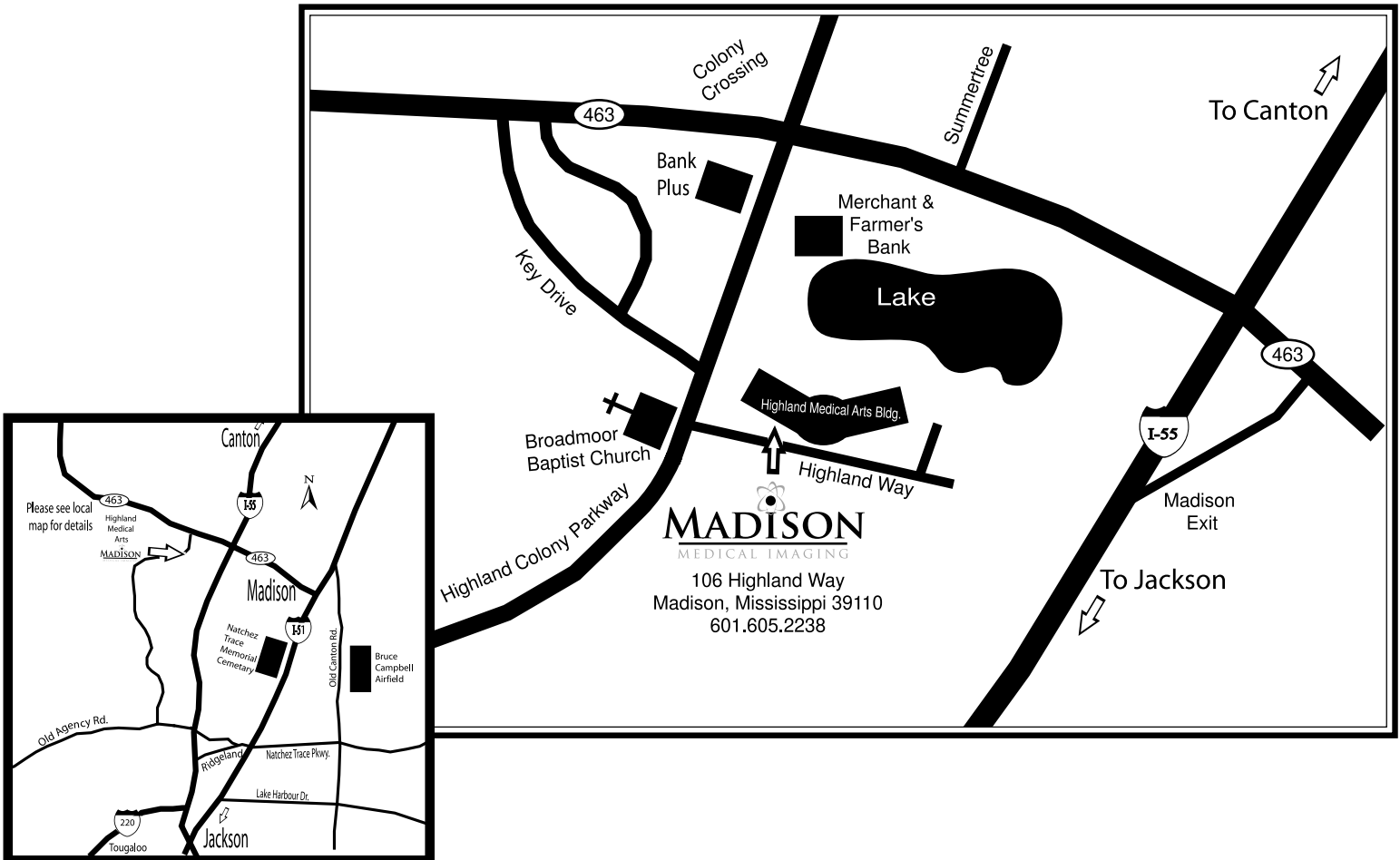
Renal Scan: Drink several glasses of water prior to the exam.

Captopril Hypertensive Renal Scan: Prior to your exam no ACE Inhibitors for 48 hours and drink several glasses of water.

PLEASE NOTE

- Routine medications may be taken with a small amount of water except as noted above.
- If you have a known allergy to IV contrast, please contact our CT department prior to your appointment.
- If there is a chance you might be pregnant, please have a blood test prior to all exams except ultrasounds.

If you have any questions, please call us at 601.605.2238.



Madison Medical Imaging is conveniently located on the first floor of the Highland Medical Arts Building.