



### Requests for Radiologist:

- STAT report
- Clinician's Cell for after hour STAT: \_\_\_\_\_
- CC Report to: \_\_\_\_\_
- Provide Images:  CD  Film

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Referring Clinician \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Clinician Signature \_\_\_\_\_

History, Symptoms, Reason for Exam:

### 3T MRI

#### Abdomen

- Adrenal
- Kidney
- Liver
- MRCP
- Pancreas
- Other: \_\_\_\_\_

#### Ankle

#### Athletic Pubalgia (Sports Hernia)

#### Brain

- IACs
- Neuroquant®
- Pituitary
- Orbits
- Temporal Lobes/Seizures
- TMJ
- Face
- Sinuses (Paranasal)

#### Chest

- Brachial Plexus
- Pectoralis Major
- Other: \_\_\_\_\_

#### Elbow

#### Finger:

#### Foot

- Hindfoot
- Midfoot
- Forefoot

#### Hand

#### Hip

#### Knee

- Biomet

#### Soft Tissue Neck

#### Pelvis

- Musculoskeletal
- Female G/U

W & W/O Contrast  
W/O Contrast  
Right Left

### 3T MRI (continued)

#### Prostate MRI w/3D Rendering

#### Sacrum / Coccyx

#### Shoulder

#### Spine

- Cervical
- Thoracic
- Lumbar

#### Thigh

#### Tibia and Fibula

#### Wrist

#### Other: \_\_\_\_\_

W & W/O Contrast  
W/O Contrast  
Right Left

### MR Angiography

Contrast as indicated

#### Aorta

- Thoracic
- Abdominal

#### Neck w/ (Carotids)

#### Head w/o (Cerebral)

#### Pelvis

- with Lower extremity run-off

#### MR Venography: \_\_\_\_\_

#### Other: \_\_\_\_\_

With Contrast  
W/O Contrast

### MR Arthrogram

#### Ankle

#### Elbow

#### Hip

#### Knee

#### Shoulder

#### Wrist

- If saline arthrogram is desired

Right Left

### CT

Contrast as indicated  
3D Rendering as indicated

W & W/O Contrast  
W/O Contrast  
With Only

#### Abdomen

(Pelvis if indicated)

#### Abdomen and Pelvis

- Stone Protocol
- Urogram / IVP Protocol
- \_\_\_\_\_

#### Brain

- IAC / Temporal Bone
- Orbits
- Sinus (Maxillofacial)
- Facial Bones

#### Chest

#### Extremity:

- Right  Left

Specify: \_\_\_\_\_

#### Lung Cancer Screening

#### Soft Tissue Neck

#### Pelvis

- Bony  Soft Tissue

#### Spine

- Cervical  Thoracic  Lumbar

#### CTA: Body Part \_\_\_\_\_

#### Other: \_\_\_\_\_

### X-Ray

#### Abdomen: Supine & Upright

#### Abdomen: AP (KUB)

- Cervical: Upright
  - Routine (5 views)
  - 5 views plus flexion & extension
  - Only AP and Lat

#### Chest:

- Routine (2 views)
- Only PA

#### Extremity: \_\_\_\_\_

#### Head

- Orbits
- Sinuses (Paranasal)
- Skull

#### Knee:

- Standing  Supine
- Routine (2 views)
- 3 views

#### Lumbar:

- Supine  Upright
- Routine (5 views)
- 5 views plus flexion & extension
- Only AP and Lat

#### Pelvis: AP

#### Ribs (with PA Chest)

#### Scoliosis Study

#### Thoracic Spine:

- Supine  Upright

#### Other: \_\_\_\_\_

Right Left

## For All Patients

- If you've had a prior image taken of the body part we are scanning, please bring it with you to your appointment (preferably on CD).
- If possible, wear clothing without metal (such as, metal underwire, athletic wear, etc.).
- Women of childbearing age, let our staff know if there is any chance you may be pregnant or if you're breastfeeding.
- Arrive 15 minutes prior to your scheduled appointment to complete the paperwork.
- Bring your exam order, your insurance card(s), and photo identification.

## How to Prepare for your MRI

- Abdomen or Pelvis (Female G/U, Male Prostate) MRI: fast for 4 hours prior.
- MRI with contrast: Patients receiving kidney dialysis cannot be administered contrast. Please alert our staff if you are receiving dialysis.
- Let our staff know in advance if you have a pacemaker, non-coronary stent, prosthesis, surgical clips, metal implants, or any other metal objects in your body. Some implants can negatively affect an MRI exam. You are not permitted to enter the MRI room if you have a pacemaker.
- Let our staff know if you work or have worked around metal finishing or grinding equipment. This is particularly important if you have had metal particles get into or removed from your eyes. You will need an Orbital X-ray to make sure no metal fragments are near your eyes prior to your MRI exam.
- Prostate MRI: Patients must avoid sexual intercourse for 48 hours. Please fast starting the morning of the exam, and only have clear liquids from noon the day before. Please purchase a Fleet enema (Available at all pharmacies; no prescription is needed, and can be found in the laxative section of the pharmacy), and administer it the evening before the MRI study. Plan to arrive 45 minutes prior to the exam to allow time for completely emptying of the bowels.

## How to Prepare for your CT

- Depending on the part of the body being scanned, you may have oral or IV contrast. There may be additional preparations for your CT as well. Our Patient Coordinators will discuss the preparations at the time you schedule your appointment.

### IV Contrast CT Patients with one or more of the following risk factors must have their creatinine checked no more than 6 weeks before the exam.

- Age 65 years old or greater
- History of renal disease, solitary kidney, kidney transplant or kidney tumor
- History of severe liver disease, liver transplant or pending liver transplant
- Diabetes treated with insulin or other medications
- High-blood pressure that is not controlled by medication

NEARBY LOCATIONS		MRI	CT	MSK Ultrasound	XRAY
<b>Bethesda</b>   10215 Fernwood Road, Suite 40	T   240-673-1500 F   240-673-1501	<b>3T Wide</b>	•		
<b>Foxhall</b>   3301 New Mexico Avenue, Suite 132	T   202-966-0606 F   202-244-6757	<b>3T Wide 1.5T Extremity</b>		•	
<b>Germantown</b>   20410 Observation Drive, Suite 106	T   240-397-6674 F   240-397-6676	<b>3T</b>	•		
<b>Greenbelt</b>   7701 Greenbelt Road, Suite 102	T   301-464-6400 F   301-464-6404	<b>3T Wide</b>		•	
<b>Hagerstown</b>   1185 Imperial Drive, Suite 100	T   301-733-1477 F   301-733-7758	<b>1.2T Open 3T Wide</b>	•		•
<b>Olney</b>   3300 Olney-Sandy Spring Road, Suite 100	T   301-260-2971 F   301-260-7971	<b>3T Wide</b>			

View our full list of locations at [www.ProgressiveRadiology.com](http://www.ProgressiveRadiology.com)