

Today's Date: Patient Name: Date of Birth: Phone: Alternate Phone: Clinical History: Referring Provider Name (Print): Referring Provider Signature: CC Report to:

PRIORITY

Routine Fax: Stat Call: Stat Fax:

MEDIA REQUESTED

Films CD Patient Hand Carry Courier to Deliver Comparison Film Location:

MRI With & Without Contrast Without Contrast 3D Recon

3T 1.2T High Field Open 1.5T Brain: IAC/Trigeminal Brain Anti-Amyloid/ARIA Pituitary Quantitative Volumetric Imaging (NeuroQuant, LesionQuant, icobrain) Protocol: Dementia Seizures MS TBI Peds Orbits TMJ Spine: Cervical Thoracic Lumbar Sacrum/Coccyx Neck (Soft tissue) MRV: Head Legs/AVF Abdomen: Adrenal Glands Elastography Enterography Eovist Liver Kidney Liver MRCP Pancreas Renals Pelvis: Prostate Bony Soft Tissue Extremity/Joint: R L Bilateral Shoulder Elbow Wrist Hand Hip Knee Ankle Foot MR Arthrogram (with imaging guidance as needed) List Body Part: R L MRA: Brain / Cerebral / Circle of Willis Neck/Carotid & Vertebral Chest Thoracic Aorta Abdomen Abdominal w/run-off Renal Arteries Lower Extremity: R L Upper Extremity: R L Whole Body MRI: Other:

FLUOROSCOPY

Esophogram Small Bowel Barium Enema/Lower GI (w/air when indicated) UGI: w/air w/SBFT VCUG Cystogram Hysterosalpingogram (HSG) Other:

X-RAY (Walk in; No appointment necessary)

Elbow: OR OL OBil Knee: OR OL OBil OWB Wrist: OR OL OBil Ankle: OR OL OBil OWB Hand: OR OL OBil Foot: OR OL OBil OWB Hip: OR OL OBil Skull Shoulder: OR OL OBil Ribs: OR OL OBil Sinus: Waters Series Neck (Soft tissue) Abdomen Flat/Upright KUB IVP (no tomo) Chest: PA PA/LAT Spine: Cervical Thoracic Lumbar 3 View 5 View Flex/Ext Other:

PEDIATRIC ULTRASOUND

Abdominal Ultrasound Infant Head Ultrasound (<1yr of age) Infant Spine Ultrasound (<6 months of age) Infant Hips Ultrasound (<6 months of age) Pyloric Ultrasound (<5 months of age) Other:

CT w/contrast w/o contrast w/wo contrast w/wo contrast per rad 3D rendering as indicated

Brain Temporal Bones Temporal Bones/IAC's Orbits Maxillofacial - Facial Bones Sinus: Fusion Stryker Instatrak Landmark/Medtronic Neck (Soft tissue) Spine: Cervical Thoracic Lumbar Extremity Joint: R L Bilateral List Body Part: Extremity (non-joint): R L Bilateral List Body Part: Chest: Routine Hi-Res Lung Screening Calcium Score Abdomen: Liver Pancreas Renal Mass Adrenal Abdomen & Pelvis: Urogram Enterography Stone Protocol Routine Pelvic Congestion Pelvis Virtual Colonoscopy Other:

CTA (ANGIOGRAPHY)

Brain Neck Chest: Aorta PE Abdomen Pelvis Coronary (If indicated, FFRCT) Abdomen & Pelvis: Post Stent Pre Stent Venogram Venogram Abdomen/Pelvis/Legs Aorta and runoff vessels

ULTRASOUND (Doppler if indicated)

Thyroid Abdomen: Limited Complete Area of concern: Liver Gallbladder Upper Right Quadrant Lower Right Quadrant Renal: w/Bladder Renal Arteries Bladder (w/pre and post voiding) Pelvis: TV/TA TA only TV only Venous Doppler (Duplex): R L Bilateral Upper Lower Carotid Doppler (Duplex) Arterial Doppler (Duplex): R L Bilateral Upper Lower Ankle Brachial Indices (ABI) Scrotum/Testicular Other: OB w/ TV (1st Trimester) (2nd/3rd Trimester)

BREAST IMAGING

Digital Screening Mammogram: Implants (Proceed with Diagnostic Mammogram and/or US if necessary) Diagnostic Mammogram (US if necessary) Ultrasound Breast: R L OBil Stereotactic Biopsy: R L OBil US Biopsy: R L OBil

DEXA

Bone Density Date of last exam: Reason for bone density:

NUCLEAR MEDICINE

Bone Scan: 3 Phase Limited Whole Body SPECT Location: DaTscan w/SPECT Gallbladder (HIDA): w/EF w/o EF (Bile Leak) Gastric Emptying GI Bleed Scan Liver/Hemangioma w/SPECT Liver/Spleen w/SPECT Meckel's Scan MUGA Octreoscan Parathyroid w/Spect Renal Scan w/Lasix Thyroid Uptake Scan w/1123 VQ Lung Scan w/Chest 2 View X-Ray WBC Scan: Limited Whole Body Dual Isotope

NUCLEAR MEDICINE w/SPECT/CT PARK CENTRAL ONLY

Bone Scan: 3 Phase Limited Whole Body SPECT Location: DaTscan w/SPECT/CT Octreoscan w/SPECT/CT Liver/Spleen Parathyroid w/SPECT/CT w/SPECT/CT

PET/CT

Amyloid Brain FDG Skull Base to Mid-Thigh FDG Whole Body (Melanoma) F-18 PSMA/PyL (Prostate Cancer - Initial Staging/Recurrence) Ga 68 NetSpot (Neuroendocrine Tumor) FDG Brain (Metabolic) 18F-FES Cerianna (ER+ Breast Cancer) F-18 Axumin (Prostate Cancer Recurrence)

PET/MR PARK CENTRAL ONLY

PET (Select One) FDG Metabolic Brain (78608, A9552) Amyloid Brain Scan - Amyvid (78811, A9586) Amyloid Brain Scan - Vizamyl (78811, Q9982) MRI (Select One) MR for Attenuation Correction/ PET Fusion Only (No dedicated MRI sequences) MR Brain WO (70551) MR Brain W (70552) MR Brain W WO (70553)

INTERVENTIONAL RADIOLOGY

US Guided Thyroid Biopsy: Core FNA US Guided Lymph Node Biopsy: Core FNA US Guided Liver Biopsy Paracentesis CT Myelogram (w/Fluoroscopy Guidance): Cervical Thoracic Lumbar Lumbar Puncture Central Venous Access Port: Placement Removal Central Venous Access Catheter: Placement Repositioning Replacement Removal Midline Venous Access Catheter: Placement Removal PICC Line: Placement Removal Other:

# Locations, Maps & General Information

**Scheduling** P: (480) 455-1850 | F: (480) 455-1855

CENTER	LOCATION	PHONE	3T MRI	1.5T MRI	High Field Open MRI	Prostate MRI	3D Mammography	CT	Ultrasound	Digital X-Ray	Digital Fluoroscopy	DEXA	Nuclear Medicine	PET/CT	PET/MR	Biopsy	Arthrogram	Virtual Colonoscopy	Lumbar Punctures	Myelograms
1 Ahwatukee	4530 E. Ray Rd. Ste. 160, Phoenix, AZ 85044	(480) 893-1004	●			●	●	●	●	●	●	●						●		
2 Apache Junction	1840 W. Apache Trail, Apache Junction, AZ 85120	(480) 288-6400	●			●	●	●	●	●	●	●	●	●				●		
3 MammogramNow <i>35th Ave at Walmart - A Breastlink Center</i>	6145 N. 35th Ave, Phoenix, AZ 85017	(602) 805-5565					●													
4 Breastlink Chandler	1727 W. Frye Rd. Ste. 110, Chandler AZ 85224	(480) 360-2775					●		●			●					●			
5 Breastlink Kierland	7469 E. Monte Cristo Ave, Ste. 200, Scottsdale, AZ 85260	(480) 788-8910					●		●			●					●			
6 Breastlink Mercy Gilbert	3686 S. Rome St. Ste. 200, Gilbert, AZ 85297	(480) 256-9061					●		●			●								
7 Casa Grande	1669 E. McMurray Blvd., Casa Grande, AZ 85122	(520) 876-0297	●			●	●	●	●	●	●	●					●	●	●	●
8 Gilbert Baseline	4915 E. Baseline Rd. Ste. 116, Gilbert, AZ 85234	(480) 354-9200	●			●	●	●	●	●	●	●					●	●	●	●
9 Park Central	3115 North Third Ave. Ste. S-140, Phoenix, AZ 85013	(602) 277-4111	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
10 Paseo	5891 W. Eugie Ave, Glendale, AZ 85340	(623) 226-8989	●			●		●	●	●		●								
11 Stapley	1840 S. Stapley Dr, Ste. 119, Mesa, AZ 85204	(480) 256-2090	●			●		●	●											
12 Sun City Peoria	9069 W. Thunderbird Rd, Peoria, AZ 85381	(623) 226-8898				●		●	●	●		●					●			
13 Superstition Springs	6811 E. Superstition Springs Blvd, Mesa, AZ 85209	(480) 400-7228				●		●	●	●		●								
14 Tempe Baseline	1920 E. Baseline Rd, Tempe, AZ 85283	(480) 500-1225				●		●	●	●		●								
15 Westgate	7330 N. 99th Ave. Ste. 125, Glendale, AZ 85307	(623) 223-7741	●					●	●	●	●									●
16 Westridge	2302 N. 75th Ave, Phoenix, AZ 85035	(602) 649-2055								●										

## General information

1. It is required that we have a doctor's order to perform your exam, with the exception of screening mammography.
2. Please bring a valid id card with you along with your insurance card.
3. Some exams require authorization.
4. Please plan on completing registration forms prior to your exam.
5. If possible, dress in loose, comfortable, two-piece clothing. For MRI exams, no belts, or zippers and leave your valuables at home.
6. To expedite your final results to your physician, please bring any prior exam reports/images needed for comparison.
7. Study times may vary.

## Now Offering Remote Check-in

- Simple step by step instructions for patients and a quick and easy way to communicate with our staff.
- Reduce lobby traffic and greater social distancing by waiting in the comfort of patient's vehicle.

## How does it work?

- During your pre-check-in process you will be given a number to text, notifying us of your arrival.
- We will text back and include links to complete check-in from outside the center.

For exam preparation instructions and more visit

[ArizonaDiagnosticRadiology.com](http://ArizonaDiagnosticRadiology.com)

