



# NORTH PITTSBURGH Imaging Specialists

AN AFFILIATE OF LUCIEN Diagnostic Imaging

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## RADIOLOGY SERVICES ORDER FORM

Patient Name \_\_\_\_\_

Clinical History \_\_\_\_\_

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

Appointment Date/ Time \_\_\_\_\_

Reason for Exam \_\_\_\_\_

Registration Time \_\_\_\_\_

Referring Physician Signature \_\_\_\_\_

### MRI AND MRA

- \_\_\_ Brain ..... Prep 6
- \_\_\_ Cervical Spine ..... Prep 6
- \_\_\_ Dorsal Spine ..... Prep 6
- \_\_\_ Lumbar Spine ..... Prep 6
- \_\_\_ Sacrum ..... Prep 6
- \_\_\_ Neck ..... Prep 6
- \_\_\_ Chest ..... Prep 6
- \_\_\_ Abdomen ..... Prep 5
- \_\_\_ Pelvis ..... Prep 5
- \_\_\_ Brachial Plexus \_\_\_ L \_\_\_ R ..... Prep 6
- \_\_\_ Metastatic Spinal Survey ..... Prep 6
- \_\_\_ Whole Body Metastatic Survey ..... Prep 6
- \_\_\_ Shoulder \_\_\_ L \_\_\_ R \_\_\_ With Arthrogram Prep 6
- \_\_\_ Elbow \_\_\_ L \_\_\_ R \_\_\_ With Arthrogram ... Prep 6
- \_\_\_ Wrist \_\_\_ L \_\_\_ R \_\_\_ With Arthrogram ... Prep 6
- \_\_\_ Hand \_\_\_ L \_\_\_ R ..... Prep 6
- \_\_\_ Finger \_\_\_ L \_\_\_ R \_\_\_ Digit No. .... Prep 6
- \_\_\_ Hip \_\_\_ L \_\_\_ R \_\_\_ With Arthrogram .... Prep 6
- \_\_\_ Knee \_\_\_ L \_\_\_ R \_\_\_ With Arthrogram ... Prep 6
- \_\_\_ Ankle \_\_\_ L \_\_\_ R ..... Prep 6
- \_\_\_ Foot \_\_\_ L \_\_\_ R ..... Prep 6
- \_\_\_ Extremity \_\_\_ L \_\_\_ R ..... Prep 6
- \_\_\_\_\_ (specify site) ..... Prep 6
- \_\_\_ TMJs ..... Prep 6
- \_\_\_ MR Angiogram (MRA) ..... Prep 6
- \_\_\_ Brain \_\_\_ Carotids/Neck
- \_\_\_ Renals \_\_\_ Aorta ..... Prep 5
- \_\_\_ Other \_\_\_\_\_

- \_\_\_ Orthopedic Extremity CT with Tomographic Reconstructions ..... Prep 1
- \_\_\_\_\_ (specify site)
- \_\_\_ L \_\_\_ R \_\_\_ With Arthrogram
- \_\_\_ Post Discography CT with Reconstructions \_\_\_\_\_ level ..... Prep 1
- \_\_\_ CT Angiogram ..... Prep 5
- \_\_\_ Brain \_\_\_ Carotids/Neck
- \_\_\_ Renals \_\_\_ Aorta
- \_\_\_ Other \_\_\_\_\_

### ULTRASOUND

- \_\_\_ Complete Abdomen ..... Prep 2
- \_\_\_ Renal ..... Prep 1
- \_\_\_ Aorta ..... Prep 2
- \_\_\_ Scrotum/Testicular ..... Prep 1
- \_\_\_ Prostate ..... Prep 3
- \_\_\_ Thyroid ..... Prep 1
- \_\_\_ Soft Tissue, superficial ..... Prep 1
- \_\_\_ Pelvic Transabdominal, with Transvaginal, prn . Prep 8
- \_\_\_ Pelvic Transvaginal ..... Prep 1
- \_\_\_ Obstetrical with Transvaginal, prn ..... Prep 1
- \_\_\_ Obstetrical Transvaginal ..... Prep 1
- \_\_\_ Fetal Biophysical Profile ..... Prep 1
- \_\_\_ Follicle Study
- \_\_\_ initial, transabdominal and transvaginal .. Prep 8
- \_\_\_ follow-up, transvaginal ..... Prep 1
- \_\_\_ Breast \_\_\_ L \_\_\_ R \_\_\_ Bilateral ..... Prep 1
- \_\_\_ Pediatric Hip, Bilateral ..... Prep 1
- \_\_\_ Pediatric Pyloric Stenosis ..... Prep 9
- \_\_\_ Pediatric Echoencephalogram ..... Prep 1
- \_\_\_ Pediatric Pelvis, Transabdominal ..... Prep 8
- \_\_\_ Carotid Duplex Doppler, Bilateral ..... Prep 1
- \_\_\_ Arterial Duplex Doppler, Lower Extremity
- \_\_\_ L \_\_\_ R \_\_\_ Bilateral ..... Prep 1
- \_\_\_ Arterial Duplex Doppler, Upper Extremity
- \_\_\_ L \_\_\_ R \_\_\_ Bilateral ..... Prep 1
- \_\_\_ Arterial Duplex Doppler
- \_\_\_ Bypass Graft Evaluation ..... Prep 1
- \_\_\_ Abdominal Doppler ..... Prep 2
- \_\_\_ Renal Arterial Doppler ..... Prep 2
- \_\_\_ Venous Duplex Doppler, Lower Extremity ..... Prep 1
- \_\_\_ L \_\_\_ R \_\_\_ Bilateral ..... Prep 1
- \_\_\_ Venous Duplex Doppler, Upper Extremity ..... Prep 1
- \_\_\_ L \_\_\_ R \_\_\_ Bilateral ..... Prep 1
- \_\_\_ Other \_\_\_\_\_

### CT

\_\_\_ Please check if unenhanced only

- \_\_\_ BUN \_\_\_ Creatinine \_\_\_\_\_ Date
- \_\_\_ Brain ..... Prep 5
- \_\_\_ Temporal Bones & Skull Base ..... Prep 5
- \_\_\_ Maxillofacial Bones ..... Prep 5
- \_\_\_ Orbits ..... Prep 5
- \_\_\_ Mandible ..... Prep 1
- \_\_\_ Paranasal Sinuses ..... Prep 1
- \_\_\_ Soft Tissue Neck ..... Prep 5
- \_\_\_ Chest ..... Prep 5
- \_\_\_ HRCT Chest (high resolution) ..... Prep 5
- \_\_\_ Abdomen & Pelvis ..... Prep 4
- \_\_\_ Abdomen & Pelvis for Urolithiasis ..... Prep 5
- \_\_\_ Abdomen & Pelvis CT/IVP ..... Prep 5
- \_\_\_ Cervical Spine ..... Prep 1
- \_\_\_ Dorsal Spine ..... Prep 1
- \_\_\_ Lumbar Spine ..... Prep 1
- \_\_\_ Sacrum ..... Prep 1
- \_\_\_ Sternum ..... Prep 1

**Our facility requires BUN and Creatinine blood work within the last eight (8) weeks if over 65 years of age.**