

STAND-UP®MRI MULTI-POSITION™MRI CENTRAL FLORIDA

Physician Preference:

Casselberry (407) 987-4001 □ Stand-Up® MRI □ 3.0T MRI □ No MRI Preference (407) 841-1800 □ Stand-Up® MRI □ 1.5T MRI □ No MRI Preference □ X-Ray Ormond Beach (386) 677-7730 □ Stand-Up® MRI □ 3.0T MRI □ No MRI Preference □ X-Ray
HEAD
Routine Brain (including Brain Stem) □ 70551 Brain/Attn. IACs □ 70551 Brain/Attn. Pituitary □ 70551 IACs □ 70551 Pituitary □ 70551 TMJ □ L □ R □ Bilateral □ 70336 CONTRAST: □ w/o □ w & w/o
ORBIT / FACE / NECK
Face □ 70540 Orbits □ 70540 Sinuses □ 70540 Soft Tissue Neck □ 70540 CONTRAST: □ w & w/o
MRA
Head/COW □ 70544 Neck/Carotids □ 70547 CONTRAST: □ w/o □ w & w/o
SPINE
Cervical
Sacrum/Coccyx
BODY
Chest (High-Field or 3T Only)
Special Instructions:



To request your appointment online, visit www.scheduleyourmri.com or scan this QR Code to access our appointment request form. If you prefer to call to book an appointment by phone, please call the office. Phone numbers are on the left of this form. Thank you.

Clinical Indications:	
Doctor's Name	
Doctor's Address:	
	Fax #: ()
Bootor's dignature. A	Date:/
Patient's Name:	
Patient's Phone #: ()	Date of Birth://
Surgical History:	
Insurance Company:	Claim/Policy #
Attorney:	
If in an auto accident, was patient seen by a accident? ☐ Yes ☐ No	a medical professional within 14 days of the
Date of Injury:/ Doc	es patient need EMC evaluation? ☐ Yes ☐ No
UPPER EXTREMITIES/JOINTS	
houlder	□ R □ 73221
lumerus 🖵 L	□ R □ 73218
lbow L	□ R □ 73221
orearm 🖵 L	□ R □ 73218
Vrist L	□ R □ 73221
Finger:	
humb 🖵 L	□ R □ 73218
Brachial Plexus□ L CONTRAST: □ w/o □ w & w/o	□ R □ 73218
LOWER EXTREMITIES/JOINTS	
dip L	□ R □ 73721
emur	□ R □ 73721
nee	□ R □ 73721
ib/Fib 🖵 L	□ R □ 73718
nkle 🖵 L	□ R □ 73721
orefoot 🖵 L	□ R □ 73718
indfoot□ L ONTRAST: □ w/o □ w & w/o	□ R □ 73721
X-RAY Ormond Beach or Orlando Onl	V
-SPINE	T-SPINE
TD. (3V) 🖵 72040	2 Views 🖵 72070
omplete	CHEST PA/LAT □ 71046
omplete c F&E ☐ 72052 SP Dynamic 5 ☐ 72050	ABDOMEN
-SPINE	KUB □ 74018
TD. (3V) 72100 omplete 72211	Flat & Upright 74019
omplete c F&E 72114	
SP Dynamic 5 🖵 72110	
THER	5.1.6.5
IP (UNILAI. 2/3V)ilateral Hins & Pelvis	□ L □ R□ 73502 □ 73521
	□ 73521 □ 72170
houlderhoulder	□ L □ R □ 73030
nee LTD. (ZV)nee (4 Views)	
	□ L □ R □ 73562
Alla a	



CASSELBERRY

Stand-Up MRI and 3T Imaging of Casselberry [Stand-Up® MRI & 3T MRI] 2915 Lakeview Drive **Suite 1041** Fern Park, FL 32730 (407) 987-4001 • Fax: (407) 987-4002

www.standupmriand3Timagingofcasselberry.com Tax ID: 65-0637743

NPI: 1093437386

ORLANDO

Stand-Up MRI of Orlando [Stand-Up® MRI & 1.5T MRI & X-Ray] 2010 S. Orange Avenue Orlando, FL 32806 (407) 841-1800 • Fax: (407) 841-0922 www.standupmrioforlando.com Tax ID: 59-3357390 NPI: 1184671257

ORMOND BEACH

Stand-Up MRI & Diagnostic Center [Stand-Up® MRI & 3.0T MRI & X-Ray] **Boulevard Executive Park** 555 West Granada Blvd., Suite H-1 Ormond Beach, FL 32174 (386) 677-7730 • Fax: (386) 677-7731 www.standupmrianddiagnosticcenter.com

> Tax ID: 59-3097338 NPI: 1720053515

For additional locations, please visit www.standupmrilocations.com

SAFETY PRECAUTIONS:

- Call ahead if you have a metal particle(s) in your eye(s).
- Call ahead if you ever had a metal particle(s) removed from your eye(s).
- Call ahead if you have a pacemaker.
- Call ahead if you are pregnant or think you might be pregnant.
- Call ahead if you ever had heart surgery or surgery of the heart's valves.
- Call ahead if you ever had brain surgery.
- Call ahead if you have or think you might have a metal object inside your body.
- Call ahead if you wear a medication patch.

BRING the following with you when you come for your appointment:

- Photo I.D.
- Insurance Information/Card
- A Written Doctor's Order, Prescription or Script for Your MRI Exam.
- If you already had diagnostic images made of the region that we will be scanning (MRI scans or CAT scans), please bring copies of the report(s) and, if requested by our radiologist, copies of the images (on film or CD) as well.

PREPARATION for your MRI Exam:

- If you are scheduled for an MRI exam with contrast, you may be required, depending on your age and medical condition, to have blood work done in advance. If you are told this applies to you, be advised that blood work must be done no earlier than six (6) weeks prior to your scheduled exam.
- Wear comfortable clothing with no metal in it or attached to it.
- There are no food or drink restrictions.
- Take your regular medication(s), if any, as usual.

WARNING: DO NOT BRING any of the following into the MRI Exam Room:

- Hearing Aids
- Watches
- Credit / Debit Cards
- Bank Cards
- Cell Phones
- Pagers
- PDA's
- Coins / Loose Change

- Storage Media
- Insulin Pumps
- Keys
- Tablets / Laptops
- Wallets
- · Metal Objects
- Hair Clips / Bobby Pins

Why? Because the strong magnetic field of the MRI scanner...

- can damage or completely destroy hearing aids, watches. cell phones, PDA's, storage media, insulin pumps, electronic keys, etc.
- can erase credit/debit cards
- can launch metal objects into the MRI scanner, endangering the patient or the MRI technologist.

Metal objects of any size can degrade the quality of the MRI pictures, possibly requiring the patient to return to repeat the MRI exam.

Please be advised that neither the owner of this medical practice nor the management company will be held responsible for any damages or losses resulting from a patient's failure to comply with this warning.