

**PATIENTS:**

CALL TO MAKE AN APPOINTMENT    TAKE A **CELL PHONE PHOTO** OF THIS FORM AND **TEXT OR EMAIL** IT TO **RX@ZPRAD.COM**

**Physician \*Letter of Medical Necessity\***

Please be advised that \_\_\_\_\_ Patient Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ is presently being treated under my care. I find the test indicated below to be medically necessary.

**Clinical Indications/Signs/Symptoms:** (NEEDS TO BE INCLUDED)

\_\_\_\_\_  
\_\_\_\_\_ **ICD-10:** \_\_\_\_\_

- Barak Greenfield, MD**     **Alice A. Kufs, NP**  
 **Elena Levy, RPA-C**     **Rose Rubin, RPA-C**     **Other**

**Signature:** \_\_\_\_\_  
**3601 Hempstead Turnpike • Suite 405 • Levittown, NY 11756**



**EAR, NOSE & THROAT IMAGING**

- CT**
- W/ & W/O IV Contrast     IV Contrast Only
  - No IV Contrast     Oral Contrast Only
  - No Oral Contrast
    - Sinuses - Routine
    - Sinuses - Quantitative Analysis
      - InstaTrak/ENtrak
      - Landmark
      - BrainLab
      - Stryker
      - ProtoMed
      - Other \_\_\_\_\_
    - IAC
    - Mastoid
    - Parotid
    - Larynx
    - Soft Tissue Neck
    - Chest
    - Other \_\_\_\_\_

- MRI**
- With & Without Contrast     No Contrast
  - With I.V. Sedation
    - Brain and Posterior Fossa
    - Brain and IAC
    - Parotid
    - Neck Soft Tissues
    - Sinus
    - Other \_\_\_\_\_

- MRA**
- With I.V. Sedation
    - Intracranial/Circle of Willis
    - Extra Cranial/Carotid

- Digital X-Ray**
- Adenoids
  - Adenoids cross table lateral
  - Nasal Bones
  - Paranasal Sinus
  - Chest
  - Facial Bones
  - Other \_\_\_\_\_

**Barium Swallow/Esophogram**

**Nuclear Medicine Thyroid Scan**

- Ultrasound**
- Neck
  - Thyroid
  - Carotid Doppler

**Other**

# ZWANGER-PESIRI RADIOLOGY

