

PATIENT LAST NAME

PATIENT FULL FIRST NAME

TODAY'S DATE

DATE OF BIRTH

CLINICAL INDICATIONS/SIGNS/SYMPTOMS (NOT RULE/OUT):

ICD-10:

PHYSICIAN SIGNATURE (REQUIRED)

2634 Bell Blvd, Bayside, NY 11360

T:(718) 428-2020 F:(718) 279-8077

PATIENTS:

CALL TO MAKE AN APPOINTMENT



TAKE A CELL PHONE PHOTO OF THIS FORM AND TEXT OR EMAIL IT TO RX@ZPRAD.COM

MRI (MAGNETIC RESONANCE IMAGING)

- 1 MRI Brain: No IV Contrast 70551**
☐ Stroke ☐ Cine Flow Study (78630)
☐ Headache ☐ Dizziness
☐ Dementia ☐ Seizures
☐ Memory Loss ☐ Multiple Sclerosis
☐ Transient Ischemic Attack ☐ Trauma
- 2 MRI Brain: Pre + Post IV Contrast 70553**
☐ Brain Tumor ☐ Seizures
☐ Metastasis ☐ Bell's Palsy
☐ Multiple Sclerosis ☐ Cranial Nerve Lesion
☐ Pituitary Adenoma
- 3 MRA Head: No IV Contrast 70544**
☐ Aneurysm ☐ Dizziness
☐ Vertebrobasilar Syndrome ☐ Syncope
☐ Arteriovenous Malformation ☐ Visual Field Defect
- 4 MRA Head: Pre + Post IV Contrast 70546**
☐ Post Coiling
- 5 MRV Head: No IV Contrast 70544**
☐ Sinus Thrombosis
- 6 MRI Orbits/Face: No IV Contrast 70540**
☐ Trauma
☐ Sinusitis
- 7 MRI Orbits/Face: Pre + Post IV Contrast 70543**
☐ Visual Field Defect ☐ Trauma
☐ Proptosis
- 8 MRI Soft Tissue Neck: No IV Contrast 70540**
☐ Swelling
- 9 MRI Soft Tissue Neck: Pre + Post IV Contrast 70543**
☐ Parotid Mass ☐ Tongue/Floor Of Mouth Mass
☐ Nasopharynx Mass ☐ Infection
- 10 MRA Neck: No IV Contrast 70547**
☐ Stenosis
- 11 MRA Neck: Pre + Post IV Contrast 70549**
☐ Stenosis ☐ Dizziness
☐ Bruit ☐ Stroke
- 49 Other**

X-RAY

- 120 X-Ray Head**
☐ Skull ☐ Sinus
☐ Nasal Bones ☐ Orbits For Foreign Body
☐ Facial Bones ☐ Orbits-Complete
- 122 X-Ray Chest**
☐ Chest
- 129 Other**

ULTRASOUND

- 107 Carotid Arterial Doppler 93880**
- 119 Other**

CT (COMPUTED TOMOGRAPHY)

- 50 CT Head: No IV Contrast 70450**
☐ Stroke ☐ Dementia
☐ Transient Ischemic Attack ☐ Seizures
☐ Bleed ☐ Trauma
☐ Headaches ☐ Multiple Sclerosis
- 51 CT Head: Post IV Contrast Only 70460**
☐ Infection ☐ Diplopia
- 52 CT Head: Pre + Post IV Contrast 70470**
☐ Brain Tumor ☐ Abscess
☐ Metastasis ☐ Meningitis
- 53 CTA Head: Pre + Post IV Contrast 70496**
☐ Aneurysm
- 57 CT Maxillofacial/Sinus: No IV Contrast 70486**
☐ Sinusitis ☐ Swelling
☐ Facial Bone Trauma
- 58 CT Maxillofacial/Sinus: Pre+Post IV Contrast 70488**
☐ Osteomyelitis ☐ Abscess
☐ Tumor ☐ Prior Surgery
- 60 CT Orbits: No IV Contrast 70480**
☐ Trauma
- 61 CT Orbits: Post IV Contrast Only 70481**
☐ Orbit Swelling ☐ Proptosis
☐ Visual Field Defect
- 65 CTA Neck: Pre + Post IV Contrast 70498**
☐ Carotid Stenosis/Occlusion
- 99 Other**

PETPLEASE FAX SCRIPT AND CLINICAL
NOTES TO: 631-992-6464

- PET/CT**
- 200 Brain 78608**
- 201 Skull Base To Mid Thighs 78815**
- PET with MRI for attenuation correction**
- 204 Brain 78608**
- 205 Skull Base To Mid Thighs 78812**

NUCLEAR MEDICINE

- 210 Thyroid Uptake And Scan 78014**
- 229 Other**



ZWANGER-PESIRI RADIOLOGY



SCAN TO SCHEDULE YOUR
APPOINTMENT or go to
schedule.zprad.com

(718) 732-0222 中文专线 (718) 696-0188 한국어 (718) 696-0189 zprad.com

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BROOKLYN COBBLE HILL	205 Smith Street, 11201	F G B57	(718) 684-7425
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OZONE PARK	102-34 Atlantic Ave, 11416	Q24	(718) 684-7429

