

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): _____ 42-32 Francis Lewis Blvd, Bayside, NY 11361
T: (718) 717-0003 F: (718) 225-6936

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 Dizziness
 Transient Ischemic Attack Trauma
 Headache Cine Flow Study (78630)
 Dementia Seizures
 Memory Loss Multiple Sclerosis
- 2 MRI Brain: Pre + Post IV Contrast 70553**
 Brain Tumor Seizures
 Metastasis Bell's Palsy
 Multiple Sclerosis Cranial Nerve Lesion
 Pituitary Adenoma Spectroscopy (76390)
 Internal Auditory Canals
- 3 MRA Head: No IV Contrast 70544**
 Aneurysm Vertebrobasilar Syndrome
 Pulsatile Tinnitus Arteriovenous Malformation
 Dizziness Visual Field Defect
 Syncope
- 7A MRI TMJ No IV Contrast 70336**
- 7B MRI TMJ Pre + Post IV Contrast 70336**
- 9 MRI Soft Tissue Neck: Pre + Post IV Contrast 70543**
 Nasopharynx Mass Neck Mass
 Tongue/Floor of Mouth Mass Parotid Mass
 Vocal Cord Paralysis Infection
- 10 MRA Neck: No IV Contrast 70547**
 Stenosis
- 11 MRA Neck: Pre + Post IV Contrast 70549**
 Stenosis Dizziness
 Bruit Stroke
- 12 MRI Breast: Pre + Post IV Contrast 77059**
 Breast Cancer
 Family History of Breast Cancer
 BRCA1/BRCA2 Positive
- 13 MRI Breast: No IV Contrast 77059**
 Implant Rupture
- 15 MRI Chest: Pre + Post IV Contrast 71552**
 Chest Wall Mass Abscess
 Mediastinum Mass Pericardial Disease
- 16 MRI Chest: No IV Contrast 71550**
 Pectoralis Tear SC Joint Pain
 Sternal Trauma Brachial Plexus
- 17 MRI Heart: Pre + Post IV Contrast 75561**
 Myocardial Perfusion Cardiac Function
 Myocardial Infarct Ejection Fraction
- 18 MRA Chest: Post IV Contrast 71555**
 Thoracic Aneurysm Dissection
 Pulmonary Vein Mapping
- 20 MRI Abdomen Pre + Post IV Contrast 74183**
 Abnormal Liver Functions Pancreatitis
 Hemangioma Renal Mass
 Abdominal Pain Hematuria
 Cirrhosis Adrenal Mass
- 21 MRI Abdomen Pre + Post IV Contrast with MRCP 74183/58037**
 Biliary Obstruction Jaundice
 Pancreatitis
- 22 MRI Abdomen No IV Contrast 74181**
 Hemachromatosis (1.5 Tesla Only)
 Ductal Stones
- 23 MRA Abdomen Post IV Contrast Only 74185**
 Abdominal Aneurysm Hypertension
 Mesenteric Arterial Stenosis

- 24 MRI Enterography: Pre + Post IV Contrast; with Glucagon 74183/72197**
 Crohn's Disease
 Small Bowel Tumor
 Celiac Disease
- 26 MRI Pelvis: Pre + Post IV Contrast 72197**
 Ovarian Mass Fistula
 Fibroids Rectocele
 Endometrioma Cystocele
 Adenomyosis Prostate Cancer
 Rectal Staging
 Benign Prostatic Hyperplasia
- 27 MRI Pelvis: No IV Contrast 72195**
 Pelvic Pain
 SI Joint Pain
 Sacral/Coccyx Pain
- 29 MRI Upper Extremity Joint: No IV Contrast 73221**
 R L Shoulder Indications: Fracture
 R L Elbow Joint Pain Labral Tear
 R L Wrist Arthritis Ligament Tear
 Bursitis Tendon Tear
- 32 MRI Upper Extremity Non-Joint: No IV Contrast 73218**
 R L Humerus Indications:
 R L Forearm Fracture
 R L Hand Muscle Tear
 R L Finger Specify#: _____ Tendon Tear
- 34 MRI Lower Extremity Joint: No IV Contrast 73721**
 R L Hip Indications: Meniscal Tear
 R L Knee Pain Ligament Tear
 R L Ankle Fracture Cartilage Tear
 Internal Derangement Instability
 Labral Tear
- 37 MRI Lower Extremity Non-Joint: No IV Contrast 73718**
 R L Femur/Thigh Indications:
 R L Tib/Fib / Calf Fracture
 R L Foot Muscle Tear
 R L Toe Specify#: _____ Tendon Tear
- 39 MRA ABD/PEL and Lower Extremity Runoff: Post IV Contrast 74185, 72198, 73725, 73725**
 Claudication
- 40 MRI Cervical Spine: No IV Contrast 72141**
 Neck Pain Disc Herniation
 Numbness Trauma
 Radiculopathy
- 41 MRI Cervical Spine: Pre + Post IV Contrast 72156**
 Syrinx Tumor/Mass
 Discitis Osteomyelitis
 Multiple Sclerosis
- 42 MRI Thoracic Spine: No IV Contrast 72146**
 Pain Trauma
 Disc Herniation Compression Fracture
 Radiculopathy
- 43 MRI Thoracic Spine: Pre + Post IV Contrast 72157**
 Syrinx Tumor/Mass
 Discitis Osteomyelitis
 Multiple Sclerosis
- 44 MRI Lumbar Spine: No IV Contrast 72148**
 Lower Back Pain Disc Herniation
 Numbness Radiculopathy
 Trauma Leg Pain
- 45 MRI Lumbar Spine: Pre + Post IV Contrast 72158**
 Discitis Tumor/Mass
 Post-Op
- 49 Other**

X-RAY

- 120 X-Ray Head**
 Skull
 Nasal Bones
 Facial Bones
 Sinus
 Orbits For Foreign Body
 Orbits-Complete
- 121 X-Ray Neck**
 Soft Tissue Neck Lateral
 Mandible
 TMJ Bilateral Right Left
- 122 X-Ray Chest**
 Chest
 Right Ribs
 Left Ribs
 Bilateral Ribs
 Sternum
 Sternoclavicular Joints
- 123 X-Ray Abdomen And Pelvis**
 KUB (Supine Only)
 Supine And Upright
 Pelvis
 Sacroiliac Joints
 Hysterosalpingogram
 Esophogram
 Sitz Marker Study
 Upper GI
 Upper GI/Small Bowel
 Small Bowel Series
- 124 X-Ray Spine**
 Cervical
 Add Lateral Flexion/Extension
 Add AP Right & Left Lateral Bending
 Thoracic
 Lumbar
 Obtain Lumbar Films Upright
 Add Lateral Flexion/Extension
 Add AP Bending To R & L
 Sacrum/Coccyx
 Scoliosis Series (Always Upright)
- 125 X-Ray Extremities**
 RIGHT LEFT BILATERAL
 Clavicle
 A/C Joints
 Shoulder
 Scapula
 Humerus
 Elbow
 Forearm
 Wrist
 Bone Age
 Hand
 Finger Specify #: _____
 Pelvis Weight-Bearing
 Hip Weight-Bearing
 Femur
 Knee Weight-Bearing
 Tibia/Fibula
 Ankle
 Calcaneus
 Foot Weight-Bearing
 Toe Specify #: _____
- 126 Skeletal Xray Survey**
- 129 Other**

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CT (COMPUTED TOMOGRAPHY)

50 CT Head: No IV Contrast 70450
 Transient Ischemic Attack Dementia
 Stroke 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

57 CT Maxillofacial/Sinus: No IV Contrast 70486
 Sinusitis Swelling
 Facial Bone Trauma

57A Maxillofacial/Sinus: Post IV Contrast 70487
 Post-op Osteomyelitis

62 CT Soft Tissue Neck: No IV Contrast 70490
 Salivary Stone Swelling

63 CT Soft Tissue Neck: Post IV Contrast ONLY 70491
 Neck Mass Adenopathy

66 CT Chest: No IV Contrast 71250
 Cough Atelectasis
 Lung Nodule COPD
 Asbestosis Fibrosis
 Effusion Calcium Scoring
 Congestive Heart Failure

67 CT Lung Cancer Screening: No IV Contrast G0297 or S0832 (depends on insurance)

68 CT Chest: Post IV Contrast ONLY 71260
 Hilar Adenopathy Hemoptysis
 Central Lung Cancers Infection
 Lung Mass

69 CTA Chest: Post IV Contrast Only 71275
 Aneurysm Aortic Dissection
 Pulmonary Embolism Pulmonary Vein

70 CTA Coronary Arteries: Post IV Contrast Only 75574
 Stenosis Occlusion

71 CT Calcium Scoring: No IV Contrast (self pay)

72 CT Abdomen and Pelvis: Yes Oral, No IV Contrast 74176
 Appendicitis Abdominal Pain
 Diverticulitis Fever
 Bloating

73 CT Abdomen and Pelvis: No Oral, No IV Contrast 74176
 Stonehunt

74 CT Abdomen and Pelvis: Yes Oral, Post IV Contrast Only 74177
 Enterography Lymphoma

75 CT Abdomen: Yes Oral, Pre + Post IV Contrast and Pelvis: Post IV Contrast 74178
 Oncology Follow-Up Breast Cancer
 Colon Cancer Cervical Cancer

77 CT Abdomen: Yes Oral, Pre + Post IV Contrast 74170
 Adrenal Mass Elevated LFT'S
 Pancreatic Mass Cirrhosis
 Pancreatitis Fatty Liver
 Liver Mass Renal Mass

84 CT Cervical Spine: No IV Contrast 72125

85 CT Thoracic Spine: No IV Contrast 72128

86 CT Lumbar Spine: No IV Contrast 72131

87 CT R L Upper Extremity: No IV Contrast 73200
 Fracture Clavicle Humerus Wrist
 Pain Shoulder Elbow Hand
 Scapula Forearm Fingers

88 CT R L Upper Extremity: Post IV Contrast Only 73201
 Tumor Clavicle Humerus Wrist
 Infection Shoulder Elbow Hand
 Scapula Forearm Fingers

CT (COMPUTED TOMOGRAPHY) CONT'D

90 CT R L Lower Extremity: No IV Contrast 73700
 Fracture Hip Tib/Fib Foot
 Pain Femur Ankle Toes
 Knee

91 CT R L Lower Extremity: Post IV Contrast Only 73701
 Tumor Hip Tib/Fib Foot
 Infection Femur Ankle Toes
 Knee

99 Other _____

NUCLEAR MEDICINE

210 Thyroid Uptake And Scan 78014
211 Thyroid I-131 Treatment 79005
212 Parathyroid with SPECT 78071
215 MUGA 78472
216 HIDA 78226 with CCK 78227
217 Kidneys With Flow And Function (DTPA) 78707
218 Kidneys With Lasix (DTPA) 78708
219 Gastric Emptying 78264
220 Bone Scan-Whole Body 78306
221 Bone Scan 3 Phase 78315
 Region _____
222 Bone Scan Spect 78320
 Region _____
229 Other _____

PET

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

PET/CT
200 Brain 78608 PET
201 Skull Base To Mid Thighs 78815
202 Whole Body 78816
203 F-18 Bone Mets (PROSTATE CANCER ONLY) 78816

PET with MRI for attenuation correction
204 Brain 78608 PET
205 Skull Base To Mid Thighs 78812
206 Whole Body 78813
207 F-18 Bone Mets (PROSTATE CANCER ONLY) 78813

DEXA

160 Dexa Hips, Lumbar, Wrist 77080
161 Dexa Hips, Lumbar 77080
162 Dexa with LVA 77085

Indications: _____

MAMMOGRAPHY

150 Screening Bilateral Right Left
 With 3D Tomosynthesis 77063

151 Diagnostic Bilateral Right Left
 With 3D Tomosynthesis G0279

152 Male Diagnostic Mammography
 With 3D Tomosynthesis G0279

ULTRASOUND

101 US Neck 76536
 Neck Thyroid Parotid

103 US Breast
 Complete 76641 Bilateral Right Left
 Limited 76642 Bilateral Right Left
 Dense Breast Lump
 Abnormal/inconclusive Mammography

104 US Abdomen
 Abdomen Complete 76700
 Abdomen RUQ Only 76705
 Renal/Retroperitoneum Complete 76770
 Renal Transplant including Doppler 76776
 Aorta 76775

105 US Pelvis
 Gyn Transabdominal Only 76856
 Gyn Transvaginal Only 76830
 Gyn Transvaginal AND Transabdominal 76856/76830
 Hysterosonogram 58340/76831
 Bladder 76857
 Male Pelvis 76856
 Prostate (Transrectal) 76872
 Groin R L 76881
 Testicular/Scrotal 76870

107 US Vascular / Cardiac
 Carotid Doppler 93880
 Dizziness and giddiness Localized swelling
 Syncope/Collapse Mass/Lump Neck
 Neck Pain Echocardiogram 93306
 Complete Abdominal Doppler 93975
 Renal Artery Doppler 93975

108 Extremity Doppler Ultrasound
 Venous for DVT Upper Lower
 Bilateral 93970 Right 93971 Left 93971
 Pain Edema
 Difficulty walking Shortness of breath

Venous for Insufficiency (lower)
 Bilateral 93970 Right 93971 Left 93971

Arterial Upper
 Bilateral 93930 Right 93931 Left 93931

Arterial Lower
 Bilateral 93925 Right 93926 Left 93926
 Atherosclerosis Claudication Pelvic Pain

119 Other ---

INTERVENTIONAL/BIOPSY

170 US Breast FNA 76942/10022
 Specify Region _____

171 US Core Biopsy 19083 (includes post procedure mammo)
 Specify Region _____

172 Stereotactic Biopsy 19081 (includes post procedure mammo)
 Specify Region _____
 Perform targeted US first, if lesion identified, biopsy under US

173 MRI Breast Biopsy 19085
 Specify Region _____
 Perform targeted US first, if lesion identified, biopsy under US

179 Other _____