

ZWANGER-PESIRI RADIOLOGY

AUBURNDALE CHIROPRACTIC CENTER

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

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) Mark Snyder, DC

193-02 Northern Blvd, Flushing, NY 11358

T: (718) 224-3605 • F: (718) 229-1003

PATIENTS:

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

WORKERS' COMPENSATION

Date of Accident:

Employer name/phone:

Insurance co. name/address: Claim# or SS#:

NO FAULT Date of Accident: Ins. co. name/address:

Claim#: Adjuster name:

PLEASE NOTE: NYS MANDATES THAT MEDICARE RECIPIENTS MUST BE REFERRED BY THEIR PRIMARY MD FOR ANY RADIOLOGY STUDY.

MRI (MAGNETIC RESONANCE IMAGING)

27 MRI Pelvis: No IV Contrast 72195

- ☐ Pelvic Pain
- ☐ Sacral/Coccyx Pain
- ☐ SI Joint Pain

40 MRI Cervical Spine: No IV Contrast 72141

- ☐ Neck Pain
- ☐ Numbness
- ☐ Radiculopathy
- ☐ Disc Herniation
- ☐ Trauma

42 MRI Thoracic Spine: No IV Contrast 72146

- ☐ Pain
- ☐ Disc Herniation
- ☐ Radiculopathy
- ☐ Trauma
- ☐ Compression Fracture

44 MRI Lumbar Spine: No IV Contrast 72148

- ☐ Lower Back Pain
- ☐ Numbness
- ☐ Trauma
- ☐ Disc Herniation
- ☐ Radiculopathy
- ☐ Leg Pain

49 Other

ULTRASOUND

SPECIFY:

OTHER

X-RAY

122 X-Ray Chest

- ☐ Chest
- ☐ Right Ribs
- ☐ Left Ribs
- ☐ Bilateral Ribs
- ☐ Sternum
- ☐ Sternoclavicular Joints

124 X-Ray Spine

- ☐ All Films Performed Upright
- ☐ Cervical AP, LAT & APOM
 - ☐ Add Obliques
 - ☐ Add Lateral Flexion/Extension
 - ☐ Add AP Right & Left Lateral Bending
- ☐ Thoracic AP, LAT
 - ☐ Add Obliques
- ☐ Lumbar AP, LAT
 - ☐ Add Obliques
 - ☐ Add Lateral Flexion/Extension
 - ☐ Add AP Bending To R & L
- ☐ Sacrum/Coccyx
- ☐ Scoliosis Series (Always Upright)

129 Other

CT (COMPUTED TOMOGRAPHY)

78 CT Pelvis: No Oral, No IV Contrast 72192

- ☐ Bony Pelvis
- ☐ SI Joints
- ☐ Sacrum/Coccyx

84 CT Cervical Spine: No IV Contrast 72125

85 CT Thoracic Spine: No IV Contrast 72128

86 CT Lumbar Spine: No IV Contrast 72131

99 Other



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

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TOWN	ADDRESS	TRANSIT	FAX NUMBER
MANHATTAN HARLEM	324W 125th St, 10027	A C B D M3, M10, M100, M101, M60, BX15	(718) 696-0767
BRONX PARKCHESTER	1888 Westchester Ave, 10472	6 Q44, BX4, BX4A, BX36, BX39	(718) 696-0193
BROOKLYN COBBLE HILL	205 Smith Street, 11201	F G B57	(718) 684-7425
	CROWN HTS	2 3 4 B14, B17, B46	(718) 684-7438
QUEENS BAYSIDE	213-02 Northern Blvd, 11361	Q12, Q13, Q27, Q31, QM3, n20, n20G	(718) 684-7423
ELMHURST	88-12 Queens Blvd, 11373	R M Q59, Q60	(718) 684-7427
LAURELTON	231-35 Merrick Blvd, 11413	Q5	(718) 684-7421
OZONE PARK	102-34 Atlantic Ave, 11416	Q24	(718) 684-7429

