To electronically order an exam you must be signed in as a REFERRING PHYSICIAN

STAT EXAMS

Please call the **STAT ROOM** Ext. **2250**

ZP RAD — PHYSICIAN WEB PORTAL

ELECTRONIC REFERRAL/ORDER Logout

Physician Letter of Medical Necessity. Please be advised that the patient below is presently being treated under my care. I find the test indicated below to be medically necessary.

Enter new patient information below or use the search button to find registered ZP patients.

My Account

A | Last Name | **B** First Name | Date of Birth | Search | Clear All | Prior Reports

Electronic Referral/Order

Referral History

Patient Address | Patient Email | Patient Phone Number

Preferences

D View Currently Ordered Exams → Tracks orders
Frequently Ordered Exams → Order history

SELECT EXAM:
- MRI
- CT
- XRAY
- ULTRASOUND
- MAMMOGRAPHY
- DEXA
- PET
- NUCLEAR MEDICINE
- FLUORO
- MSK FLUORO INTERVENTIONAL
- BIOPSY

E
- ⦿ BRAIN/ENT
- ○ SPINE
- ○ BREAST
- ○ CHEST
- ○ ABDOMEN
- ○ BODY (ABDOMEN AND PELVIS)
- ○ PELVIS
- ○ VASCULAR
- ○ RIGHT UPPER EXTREMITY
- ○ LEFT UPPER EXTREMITY
- ○ RIGHT LOWER EXTREMITY
- ○ LEFT LOWER EXTREMITY

C Patient Not Found! X
Use the Continue button to fill in the patient contact information
Continue

F
- ⦿ MRI-CERVICAL SPINE NON CONTRAST 72141
  - ○ MRI-CERVICAL SPINE PRE AND POST CONTRAST 72156
- ○ MRI-THORACIC SPINE NON CONTRAST 72146
  - ○ MRI-THORACIC SPINE PRE AND POST CONTRAST 72157
- ○ MRI-LUMBAR SPINE NON CONTRAST 72148
  - ○ MRI-LUMBAR SPINE PRE AND POST CONTRAST 72158
- ○ MRI-SACRUM/COCCYX NON CONTRAST 72195
  - ○ MRI-SACRUM/COCCYX PRE AND POST CONTRAST 72197
- ○ MRI-LUMBOSCARAL PLEXUS NON CONTRAST 72148
  - ○ MRI-LUMBOSCARAL PLEXUS PRE AND POST CONTRAST 72158

Submit Request | View all Request(s)

A. To order an electronic referral/order please select this icon on the left hand side:
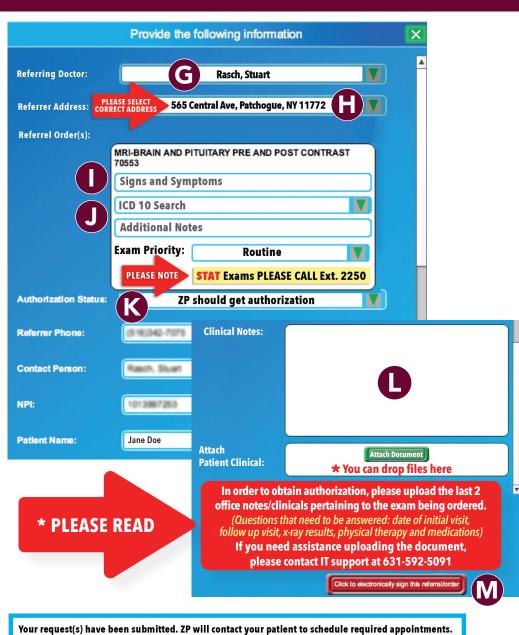
Rx — Electronic Referral/Order

B. Enter patient's last name, first name and date of birth then click "search."

C. If you receive this window please continue to fill in patient's address and phone number, then proceed to D.

D. Select modality.

E. Select body part.

F. Select exam and click "submit request(s)."

G. Once logged in, you can select an *alternate referring physician from your group* in the drop-down menu.

H. Please select correct address if more than one location.

I. Enter signs and symptoms.

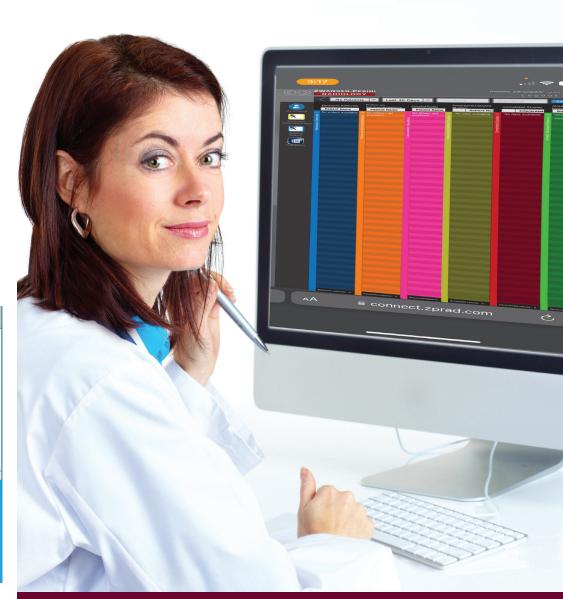**J.** Enter primary ICD 10 or perform search. Add additional notes and/or additional ICD 10 codes. Set exam priority.
STAT exams should be called in to Ext. 2250

K. "ZP should get authorization" expands the submission window for patient demographic verification/clinical note attachments.

Provide the following information X

Referring Doctor: | **G** | Rasch, Stuart

Referrer Address: | PLEASE SELECT CORRECT ADDRESS → | 565 Central Ave, Patchogue, NY 11772 | **H**

Referral Order(s):

MRI-BRAIN AND PITUITARY PRE AND POST CONTRAST 70553

I | Signs and Symptoms

J | ICD 10 Search
Additional Notes

Exam Priority: | Routine

PLEASE NOTE → | **STAT Exams PLEASE CALL Ext. 2250**

Authorization Status: | **K** | ZP should get authorization

Referrer Phone: | (516)342-7079

Contact Person: | Rasch, Stuart

NPI: | 101398725?

Patient Name: | Jane Doe

Clinical Notes: | **L**

Attach Patient Clinical: | Attach Document ✳ You can drop files here

In order to obtain authorization, please upload the last 2 office notes/clinicals pertaining to the exam being ordered. *(Questions that need to be answered: date of initial visit, follow up visit, x-ray results, physical therapy and medications)* **If you need assistance uploading the document, please contact IT support at 631-592-5091**

✳ PLEASE READ

Click to electronically sign this referral/order **M**

Your request(s) have been submitted. ZP will contact your patient to schedule required appointments. X

Submitted Referral/Orders | Order Additional Requests | View/Upload Clinical Informaion | Finished | Print/Save

MRI-BRAIN NON CONTRAST 70551
none **N** | Delete

L. For your convenience, you can copy/paste necessary clinical notes from EMR or TYPE detailed clinical notes *along with uploading any clinical documents to support authorization requirements.*

M. To submit request(s), click to electronically sign the referral/order.

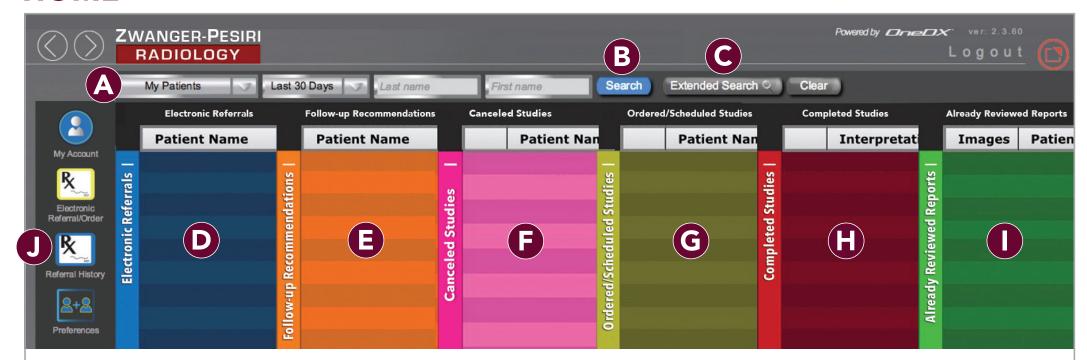**N.** Confirmation of submission. **Repeat this process for additional exams.**

ZPRAD CONNECT
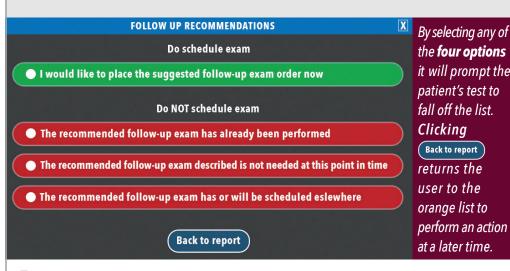
connect.zprad.com

BOMGAR™

For support call
631.225.7200 Ext. 9000
For online support visit
support.zwangerpesiri.com

HOME

A. My Patients Shows all patients referred by the provider within the last 30 days. To change or look at an entire group, click on the drop down menu.

B. Search Enables you to search a patient in the Zwanger-Pesiri Radiology data base. Required field is patient name.

C. Extended Search Patients not referred by your group or studies older than 30 days.

D. Electronic Referrals Online patient appointment request and patient status during scheduling process.

E. Follow-up Recommendations Once completed exam is reviewed, you will be prompted to Follow-up Recommendations.
The options below will appear:

*By selecting any of the **four options** it will prompt the patient's test to fall off the list. Clicking* Back to report *returns the user to the orange list to perform an action at a later time.*

F. Canceled Studies If the exam is canceled due to an authorization denial, the denial letter will be able to be viewed and downloaded here.

G. Ordered/Scheduled Studies Studies that have been ordered and/or scheduled at Zwanger-Pesiri Radiology.

Regardless of how the order is requested (Appointment called in, entered on portal, or through EMR), *all orders can be viewed here.*

Denied OneDx will be displaying an Auth Status of "**Denied**" when exam has not been authorized. Clicking on the red "**Denied**" button will open the denial letter and it then can be downloaded if needed.

H. Completed Studies Reports and images not yet reviewed by your group.

I. Already Reviewed Reports Reports and images reviewed by your group.

J. Referral History Shows all previously ordered electronic referrals. Double-click on a patient to see exam/authorization notes and information. Clicking on the study will allow you to view the images.

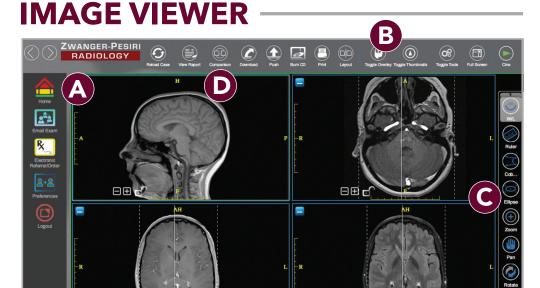**QUESTIONS? Please Contact Your Marketing Representative.**

PATIENT REPORTS

Patient report loads automatically after loading a study.
A. View Images
B. View (Reports) as a PDF For best print format or to download.
C. Prior Reports View previous reports for selected patient.

IMAGE VIEWER

A. Home Menu Navigate back to list of patients.

B. Display Settings Customize your viewer with different options such as split screen.

C. Image Manipulation Use these tools to pan, zoom, rotate, measure, etc., as you view the images. Tool bar can also be accessed by right-click on user's mouse.

D. Comparison Review prior reports and images of your patient.

E. Images The thumbnail series are displayed across the bottom. To view a specific image series, drag and drop the thumbnail into the viewer above.