

# Grossman Imaging Centers TAX I.D. #95-3636521 • NPI #1366463572

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=NAM22096	75-3636521 • NPI #1366463572  ☐ 2151 E. Gonzales, #101 - Oxnard □	2705 Loma Vista Rd., #100 - Ventura	□ 2900 Loma Vista Rd., #101 - Ventura
		of BirthTo	
Appt. Date	Check in Time S	Scan Time Day Phone	
BUN/CREATININE - COMPLETED IN LAST 30 DAYS. (PLEASE FAX WHEN SCHEDULING) OR BUN/CREATININE - TO BE DONE AT GROSSMAN IMAGING.			
Clinical History/Symptoms/Diagnosis			
			A.,446, 44
		WeightICD-9	
Referring Physician		Phone	Fax
□ STAT: □ CALL Stat results to	: D F/	AX Stat results to:	Send Films with Patient
		dditional report to:	Send CD to Physician
MRI	СТ	BREAST IMAGING	Interventional Radiology
Contrast:WithoutWith	☐ Contrast:WithoutWith	☐ Screening Mammogram	☐ Hysterosalpingogram (HSG)
With and Without		☐ Diagnostic Mammogram	☐ PICC Line
Contrast at Radiologists Discretion	With and Without	☐ Breast Ultrasound	☐ Port Placement/Removal
Abdomen-Attn:LiverSpleenKidneys	Contrast at Radiologists Discretion	LeftRightBilateral	☐ Vertebroplasty
PancreasAdrenal Glands	□ BUN/CREATININE	☐ Breast MRI - Bilateral with contrast	☐ Balloon Kyphoplasty
Abdomen (MRCP)	☐ CT Bone Density - Thoracolumbar	☐ Breast Biopsy - MRI Guided LeftRight	☐ Varicose Vein Procedure
☐ Brachial PlexusLeftRight ☐ Brain	☐ Brain	☐ Breast Biopsy - Stereotactic	☐ Upper GI
☐ Brain Spectroscopy	☐ Chest - Low Dose Lung Screening	LeftRight	☐ Paracentesis
☐ Breast MRI - Bilateral with contrast	☐ Coronary Calcium Scoring	☐ Breast Biopsy - Ultrasound	Other:
☐ Cardiac	☐ Mastoid Temporal Bones – IAC's	LeftRight	ULTRASOUND
Chest-Attn:	☐ Facial Bones - Mandible with 3D	Date last mammogram:	☐ Abdomen
☐ IAC's ☐ Liver with Eovist	☐ Facial Bones - Maxillofacial with 3D	Breast implants:yesno	☐ Abdomen with Doppler
☐ Neck – Soft Tissue	☐ Sinuses with 3D	salinesilicone	☐ Aorta
☐ Orbits	☐ Spine	DEXA	☐ Biopsy / Aspiration / Injection☐ Bladder
Pelvis:BonySoft Tissue	CervicalThoracicLumbar	DEXA Bone Density	☐ Breast _Left _Right _Bilateral
☐ Pituitary ☐ Prostate - Pelvis w/ Dynamic Contrast	☐ Myelogram:	BONE SCAN	☐ Extremity
Enhancement (DCE) of Prostate	CervicalThoracicLumbar	☐ Bone Scan F18 (PET)	Upper_Lower_L_R_Bilateral
Spine:	☐ Treatment Plan	PET/CT	☐ Pelvis Transabdominal ☐ Renal ☐ with Bladder
CervicalThoracicLumbar Extremity (Joint)LeftRight	□ Neck-Soft Tissue	☐ PET/CT - Head to Thigh	Scrotum with Doppler
Specify Joint	☐ Orbits with 3D	☐ PET/CT – For Melanoma Head-Toe	☐ Soft Tissue Neck
Extremity (Non-Joint)LeftRight Specify body part	☐ Chest	PET/CT – Brain	☐ Sonohysterogram (HSS)
☐ TMJ	☐ Abdomen ☐ Pelvis ☐ Both (Abd/Pel)	☐ PET Bone Scan – (F18)	☐ Thyroid
Other:	☐ Urogram (Abdomen/Pelvis) w/contrast	X-RAY	☐ Transvaginal
MR Angiography (MRA)	☐ Urogram (Stone Protocol) w/o contrast	☐ Chest	<ul><li>→ Wellness Screening</li><li>→ Other:</li></ul>
Contrast:WithoutWith	CT Angiography (CTA)	☐ KUB	Vascular Studies
With and Without	☐ Aorta with 3D	Post Myelo Flexion Extension Views	
Abdominal Aorta with 3D	☐ Abdominal Aorta with Runoff	☐ IVP Ø Tomo	☐ Arterial DopplerLR-Up Ext
☐ Brain (COW) with 3D ☐ Carotid/Neck with 3D	☐ Aorta with 3D:Abdominal	Other:	☐ Arterial Doppler w/ABI_LR-Low Ext☐ Venous DopplerLR - Upper Ext☐
Pelvis with 3D			☐ Venous DopplerLR - Opper Ext
Renal with 3D	ThoracicBoth		☐ Carotid _Left _Right
Runoff – Abdomen & Bilateral	☐ Brain/Cow with 3D	Biopsies with Imaging Guidance	☐ Other:
Extremities with 3D  Subclavian with 3D	☐ Carotid-Neck with 3D	☐ CT ☐ Fluoroscopy ☐ Ultrasound	OB Ultrasound
☐ Thoracic Aorta (Aortic Arch) with 3D	Chest	☐ KidneyLeftRight	☐ OB < 14 Wks w/ Transvaginal
☐ Venogram with 3D	Coronary Angio (CTA)	☐ Liver	☐ OB < 14 Wks Transabdominal Only
Other:	(CT64 with 3D)	☐ Lung	☐ OB Ultrasound2nd3rd Trimester
MR Arthrography	Extremity w/ 3D:UpperLower	☐ Thyroid Core Biopsy	☐ Nuchal Translucency
Left Right	☐ Pulmonary Artery with 3D	☐ Thyroid Fine Needle Aspiration	☐ Biophysical Profile
Specify Joint With Steroid Injection	☐ Renal Arteries with 3D	Other:	☐ Other:

# PLEASE BRING THIS FORM AND YOUR INSURANCE CARD WITH YOU ON THE DAY OF YOUR EXAM **FOR ALL STUDIES:**

Unless otherwise instructed, please arrive 30 minutes before your study to complete the necessary paper work.

#### MRI CHECKLIST

# The Following Conditions May Prevent You From **Having An MRI Exam**

- 1. Cardiac Pacemaker. 2. Cerebral Aneurysm Clips.
- 3. Metal fragments in the eyes. 4. Pregnancy.
- Please wear comfortable clothing.
- Abdomen or MRCP or Contrast Studies Nothing to eat or drink 4 hours prior to your study.
- Head and Neck

No eye makeup for neck & head studies.

- Remember to bring: 1. Health Insurance Information
  - 2. Recent X-ray Studies 3. Previous MRI Studies
  - 4. Mammography films if having breast MRI

### **PET/CT INSTRUCTIONS**

Please allow up to 3 hours for your scan. No food for 6 hours prior to your scan. Please drink at least 24oz. of PLAIN water before your exam. You may empty your bladder.

## MAMMOGRAPHY INSTRUCTIONS

Do not use any powders, talcs, sprays or deodorants on your breast or underarm area before your exam. Prior to your exam, please arrange to have your previous mammography films and reports sent to our office, or bring them with you on the day of your exam.

## **ULTRASOUND CHECKLIST**

Abdomen

Nothing to eat or drink 6 hours prior to exam

Pelvis / OB

□ Kidney / Bladder

1 hour prior to exam time - drink 32 oz fluids do not empty bladder.

Ultrasound Wellness Screening

Nothing to eat or drink 6 hours prior to exam

#### CT SCAN INSTRUCTIONS

**IV Contrast** - Have nothing to eat 4 hours prior to exam. Drink 28 oz of water 2 hours prior to exam. You may continue taking your regularly prescribed medications and/or vitamins. You may empty bladder if necessary.

Abdominal/Pelvis Studies - Have nothing to eat for 4 hours prior to the procedure. You may drink water or barium if instructed, but **NOT BOTH**.

IMAGING TIME APPROXIMATELY 15-30 MINUTES.

**Contraindications** - Pregnancy

For Coronary Angiography (CT Angiogram) or PET/

CT - Please obtain brochure with instructions from referring physician or Grossman Imaging at least 2 days prior to study.

#### **DEXA INSTRUCTIONS**

Do not take calcium supplements 24 hours prior to your scan. If you have had any x-rays using contrast such as barium, IV contrast or any nuclear medicine studies, please wait one week before having a DEXA scan. If any of these tests are scheduled for the same day as your DEXA scan, the DEXA must be performed first.

#### **VENTURA OFFICES**

#### **DIRECTIONS**

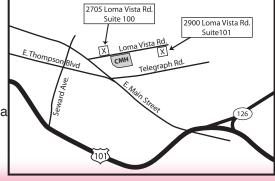
Take 101 freeway to Main Street exit, go West one mile to Loma Vista Rd., turn sharp right 1 block to to 2705 Loma Vista Rd., Suite #100.

For second Ventura office, continue down Loma Vista Rd. to 2900 Loma Vista Rd., Suite 101.

#### **DIRECCIONES**

Tome el autopista 101 hasta la salida de Main St., vaya

al sur una milla a Loma Vista Road. una cuadra a 2705 Loma Vista Road., Suite #100. (oficina) Cerca de hospital Community Memorial.



#### **OXNARD OFFICES**

#### **DIRECTIONS - SOLAR OFFICE**

Rd. Suite 101.

Take 101 freeway to Rice Road exit, go south 1 block to Gonzales Road, turn right 1 block to Solar Drive, turn right to 2001 N. Solar Drive, Suite #135. GONZALES OFFICE - Take 101 freeway to Rice Road exit, go south 1 block to Gonzales Road, turn right 2 blocks to 2151 Gonzales VENTURA (101) FWY

**DIRECCIONES** Tome el autopista 101 hasta la salida 2151 de Rice Road. Suite 101 vaya al sur una cuadra a Gonzales СВС Road, una cuadra después doble a la derecha a Solar Drive, doble a la derecha a



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