



# PROGRESSIVE DIAGNOSTIC IMAGING

STAT  FILM  
 CD  ONLINE

FAX NUMBER

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**NOTE: CURRENT BLOODWORK IS REQUIRED FOR PATIENTS OVER 60**

PATIENT NAME \_\_\_\_\_ DOB \_\_\_\_\_

REASON FOR EXAM \_\_\_\_\_ ICD CODE \_\_\_\_\_

PHYSICIAN NAME \_\_\_\_\_ PHONE \_\_\_\_\_

PHYSICIAN SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

Patients with pacemakers, cerebral aneurysm clips, ferrometallic implants CANNOT HAVE AN MRI EXAM PERFORMED

MRI	w/o contrast	w/wo contrast	CT SCAN	w/o	w/ contrast	w/wo contrast	X-RAY
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NEURO		
Brain	70551	70553
IAC	70540	70543
Orbits/Sinuses	70540	70543
Pituitary	70551	70553
Neck	70540	70543

SPINE		
Cervical	72141	72156
Thoracic	72146	72157
Lumbar	72148	72158
Sacrum-SI Joints	72195	72197

BODY		
Chest	71550	71552
Abdomen	74181	74183
Pelvis	72195	72197

MUSCULOSKELETAL		
Shoulder	73221	73223
Humerus	73218	73220
Elbow	73221	73223
Wrist	73221	73223
Hip	73721	73723
Hand	73218	73220
Femur	73718	73720
Knee	73721	73723
Ankle	73721	73723
Foot	73718	73720

MRA		
Brain	70544	70546
Neck	70547	70549

NEURO			
Brain	70450	70460	70470
Temporal Bones	70480	70481	70482
IAC	70480	70481	70482
Sinus	70486	70487	70488
Facial Bones	70486	70487	70488
Soft Tissue Neck	70490	70491	70492
C-Spine	72125	72126	72127
T-Spine	72128	72129	72130
L-Spine	72131	72132	72133

BODY			
Chest	71250	71260	71270
Thorax High Res	74150	74160	74170
Abdomen	74150	74160	74170
Pelvis	72192	72193	72194
Abd/Pelvis	74176	74177	74178

MUSCULOSKELETAL			
Upper Extremity	73200	73201	73202
Lower Extremity	73700	73701	73702
3-D Reconstructions	76376	76376	76376

## ULTRASOUND

- Abdomen Complete
- Female Pelvis (Transabd + Transvaginal)
- Pelvis (Transabd w/PVR)
- Thyroid w/ color doppler
- Testicular w/ color doppler
- Renal/Kidney
- Renal Artery Doppler
- Extremity
- Carotid
- Aorta
- LE - (Lower Extremity-Arterial) L R B
- UE - (Upper Extremity-Arterial) L R B
- LE-Venous L R B
- Plantar Fascia L R B
- Other \_\_\_\_\_

- Orbits
- Facial Bones
- Nasal Bones
- Paranasal Sinus
- Soft Tissue Neck
- Cervical Spine
- Thoracic Spine
- Lumbar Spine
- Pelvis Sacrum/Coccyx
- SI Joints
- Shoulder L R B
- Scapula L R B
- Clavical L R B
- Chest PA/LAT
- Ribs L R B
- Sternum
- Arm/Humerus L R B
- Elbow L R B
- Forearm L R B
- Wrist L R B
- Hand L R B
- Finger L R B
- Abdomen KUB
- Abdomen
- Hip L R B
- Knee L R B
- Tibia/Fibula L R B
- Ankle L R B
- Heel/Calcaneous L R B
- Foot L R B
- Other:

## CTA STUDIES

- CTA Chest w/wo contrast
- CTA Abd w/wo contrast
- CTA Pelvis w/wo contrast
- CTA Head w/wo contrast
- CTA Carotids w/wo contrast

## PREPARATION FOR DIAGNOSTIC EXAMINATIONS

When making your appointment, please inform the office if you are pregnant and consult your primary physician.

### MAGNETIC RESONANCE IMAGING (MRI) EXAMINATIONS

***please let us know if you have any of these:***

Surgical Vascular Clips, IVC Filter, Breast Tissue Expander, Silver Backed Dermal Patches, Cardiac Pacemaker  
Cochlear Implants, Neurostimulators, Penile Implants

- Do not wear eye makeup for brain or head MRI studies.
- Wear comfortable clothing free of metal around the area to be scanned.

### ALL CONTRAST STUDIES

- Do not eat or drink 4 hours prior to examination.
- Diabetic patients needing contrast, please alert our office at the time of your appointment.
- Please inform us if you are diabetic and take glucophage or glucovance.

### CT SCAN

#### **ABDOMINAL / PELVIS:**

This study often requires that you drink contrast materials prior to your study. You may pick-up this material so that you can begin drinking it at home before your exam. Otherwise, you will need to arrive 2 hours prior to your appointment to drink it. Check with your PDI scheduler as to whether you will need to drink contrast and when.

### ULTRASOUND

**PELVIC:** Drink 32 ounces of water one hour prior to your appointment. A full bladder is necessary for this scan and you may be slightly uncomfortable but please do not void before your exam.

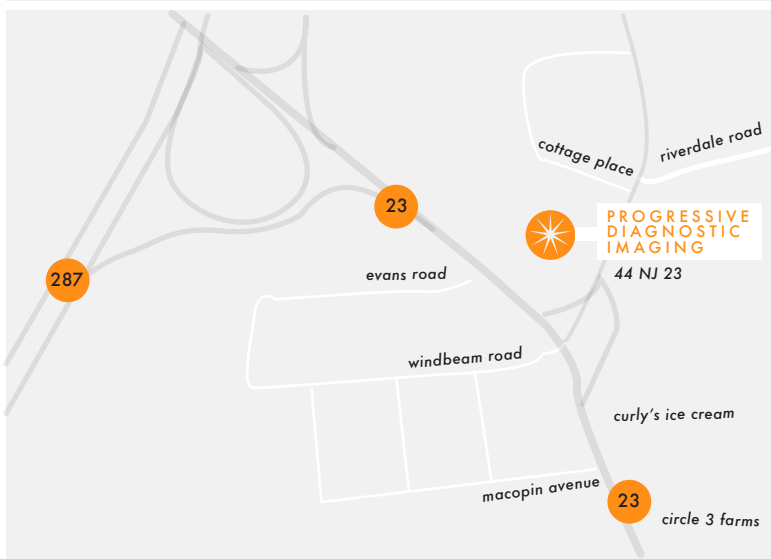
#### **ABDOMINAL (KIDNEYS, LIVER, SPLEEN, GALLBLADDER, PANCREAS, AORTA):**

Do not eat or drink anything containing fat the day before the exam.

Do not have anything to eat or drink after midnight the night before the exam.

## DIRECTIONS TO PROGRESSIVE DIAGNOSTIC IMAGING

44 NJ 23, RIVERDALE, NEW JERSEY



#### **FROM 23 SOUTH**

route 23 south to Riverdale Circle, slight right at west parkway to make u-turn back onto route 23 north exit by BP gas station (before the traffic light) bear right & turn left into our parking lot

#### **FROM 287 NORTH**

exit at 52A & follow signs to route 23 south follow from 23 south directions

#### **FROM 287 SOUTH**

exit at 52A to merge onto route 23 south to Riverdale Circle, slight right at west parkway to make u-turn back onto route 23 north exit by BP gas station (before the traffic light) bear right & turn left into our parking lot

44 Route 23 North / Riverdale, NJ 07457 / 973-839-5004 FAX: 973-839-5006

WWW.PDIRAD.COM



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