



STAND-UP[®] MRI

MULTI-POSITION[™] MRI

CENTRAL FLORIDA

Physician Preference:

Casselberry (407) 987-4001
 Stand-Up[®] MRI 3.0T MRI
 No MRI Preference

Orlando (407) 841-1800
 Stand-Up[®] MRI 1.5T MRI
 No MRI Preference X-Ray

Ormond Beach (386) 677-7730
 Stand-Up[®] MRI 3.0T MRI
 No MRI Preference X-Ray

HEAD

Routine Brain (including Brain Stem)..... 70551
 Brain/Attn. IACs 70551
 Brain/Attn. Pituitary..... 70551
 IACs 70551
 Pituitary 70551
 TMJ L R Bilateral..... 70336
 CONTRAST: w/o w & w/o

ORBIT / FACE / NECK

Face 70540
 Orbits 70540
 Sinuses 70540
 Soft Tissue Neck 70540
 CONTRAST: w/o w & w/o

MRA

Head/COW 70544
 Neck/Carotids..... 70547
 CONTRAST: w/o w & w/o

SPINE

Cervical 72141
 with Flexion & Extension on the Stand-Up[®] MRI
 Thoracic 72146
 Lumbar 72148
 with Flexion & Extension on the Stand-Up[®] MRI
 Sacrum/Coccyx 72195
 CONTRAST: w/o w & w/o

BODY

Chest (High-Field or 3T Only)..... 71550
 Abdomen (High-Field or 3T Only) 74181
 Pelvis 72195
 CONTRAST: w/o w & w/o

Special Instructions: _____

PRINTED FROM WEBSITE



To request your appointment online, visit www.scheduleyourmri.com or scan this QR Code to access our appointment request form. If you prefer to call to book an appointment by phone, please call the office. Phone numbers are on the left of this form. Thank you.

Clinical Indications: _____

Doctor's Name: _____
First MI Last

Doctor's Address: _____

Doctor's Phone #: () _____ Fax #: () _____

Doctor's Signature: X _____ Date: ____/____/____

Patient's Name: _____

Patient's Phone #: () _____ Date of Birth: ____/____/____
First MI Last

Surgical History: _____

Insurance Company: _____ Claim/Policy # _____

Attorney: _____

If in an auto accident, was patient seen by a medical professional within 14 days of the accident? Yes No

Date of Injury: ____/____/____ Does patient need EMC evaluation? Yes No

UPPER EXTREMITIES/JOINTS

Shoulder L R 73221
 Humerus L R 73218
 Elbow L R 73221
 Forearm L R 73218
 Wrist L R 73221
 Hand L R 73218
 Finger: _____
 Thumb L R 73218
 Brachial Plexus L R 73218
 CONTRAST: w/o w & w/o

LOWER EXTREMITIES/JOINTS

Hip L R 73721
 Femur..... L R 73718
 Knee..... L R 73721
 Tib/Fib..... L R 73718
 Ankle..... L R 73721
 Forefoot L R 73718
 Hindfoot..... L R 73721
 CONTRAST: w/o w & w/o

X-RAY Ormond Beach and Orlando Only

| | | |
|---|--|--|
| C-SPINE | | T-SPINE |
| LTD. (3V) <input type="checkbox"/> 72040 | | 2 Views <input type="checkbox"/> 72070 |
| Complete..... <input type="checkbox"/> 72050 | | CHEST |
| Complete c F&E <input type="checkbox"/> 72052 | | PA/LAT <input type="checkbox"/> 71046 |
| CSP Dynamic 5 <input type="checkbox"/> 72050 | | ABDOMEN |
| L-SPINE | | KUB..... <input type="checkbox"/> 74018 |
| LTD. (3V) <input type="checkbox"/> 72100 | | Flat & Upright..... <input type="checkbox"/> 74019 |
| Complete..... <input type="checkbox"/> 72211 | | |
| Complete c F&E <input type="checkbox"/> 72114 | | |
| LSP Dynamic 5 <input type="checkbox"/> 72110 | | |

OTHER

HIP (UNILAT. 2/3V) L R 73502
 Bilateral Hips & Pelvis..... 73521
 Pelvis (2 Views) 72170
 Shoulder L R 73030
 Knee LTD. (2V)..... L R 73560
 Knee (4 Views)..... L R 73564
 Knee (3V) AP/LAT/Sunrise L R 73562
 Other: _____
 Special Instructions: _____
 DX: _____



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CENTRAL FLORIDA

CASSELBERRY

Stand-Up MRI and 3T Imaging
of Casselberry
[Stand-Up[®] MRI & 3T MRI]
2915 Lakeview Drive
Suite 1041
Fern Park, FL 32730
(407) 987-4001 • Fax: (407) 987-4002
www.standupmriand3TImagingofcasselberry.com
Tax ID: 65-0637743
NPI: 1093437386

ORLANDO

Stand-Up MRI of Orlando
[Stand-Up[®] MRI & 1.5T MRI & X-Ray]
2010 S. Orange Avenue
Orlando, FL 32806
(407) 841-1800 • Fax: (407) 841-0922
www.standupmrioforlando.com
Tax ID: 59-3357390
NPI: 1184671257

ORMOND BEACH

Stand-Up MRI & Diagnostic Center
[Stand-Up[®] MRI & 3.0T MRI & X-Ray]
Boulevard Executive Park
555 West Granada Blvd., Suite H-1
Ormond Beach, FL 32174
(386) 677-7730 • Fax: (386) 677-7731
www.standupmrianddiagnosticcenter.com
Tax ID: 59-3097338
NPI: 1720053515

For additional locations, please visit www.standupmrilocations.com

SAFETY PRECAUTIONS:

- Call ahead if you have a **pacemaker**.
- Call ahead if you ever had **brain surgery**.
- Call ahead if you ever had **heart surgery** or surgery of the heart's valves.
- Call ahead if you have a **metal particle(s) in your eye(s)**.
- Call ahead if you ever had a **metal particle(s) removed from your eye(s)**.
- Call ahead if you are **pregnant** or think you might be pregnant.
- Call ahead if you have or think you might have a **metal object inside your body**.
- Call ahead if you wear a **medication patch**.
- Call ahead if you wear **nail polish that contains magnetic particles**, such as cat eye gel polish.

PREPARATION for your MRI Exam:

- If you are scheduled for an MRI exam **with contrast**, you may be required to have blood work done in advance. If you are told this applies to you, please be advised that blood work must be done no earlier than six (6) weeks prior to your scheduled exam.
- Do not bring jewelry or valuables with you.
- Avoid wearing metal objects near the area to be scanned.
- Sweatsuits are advisable because they are comfortable and have very little, if any, metal in them.
- Do not wear Tommie Copper or lululemon clothing. There is metal in them.
- If there is a problem with what you are wearing, we will gladly provide you with a gown.
- There are no food, drink or medication restrictions.

BRING the following with you when you come for your appointment:

- Photo I.D.
- Insurance Information/Card
- A Written Doctor's Order, Prescription or Script for Your MRI Exam.
- If you already had diagnostic images made of the region that we will be scanning (MRI scans or CAT scans), please bring copies of the report(s) and, if requested by our radiologist, copies of the images (on film or CD) as well.

Please be advised that neither the owner of this practice nor the management company will be held responsible for any damages or losses resulting from a patient's failure to comply with the above safety precautions and warnings.

WARNING: DO NOT BRING any of the following into the MRI Exam Room:

- | | | |
|------------------------|----------------------|--------------------|
| • Hearings Aids | • Keys | • Pins |
| • Watches | • Tablets/Laptops | • Coins/Loose |
| • Cell Phones | • Credit/Debit Cards | • Change |
| • PDA's | • Wallets | • Firearms/Weapons |
| • Storage Media | • Metal Objects | |
| • Insulin Pumps | • Hair Clips/Bobby | |

Why? Because an MRI scanner's magnetic field...

- can damage or completely destroy hearings aids, watches, cell phones, PDA's, storage media, insulin pumps, electronic keys, etc.
- can erase credit/debit cards
- can launch metallic objects, creating a serious hazard to the patient
- can degrade the quality of the MRI pictures, requiring you to repeat the exam.