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Maplewood Kernersville WSHC The Breast Clinic

Scheduling: (336) 794-XRAY (9729)
Fax Scheduling: (336) 659-2362

Patient's Name: _____ Appointment: _____ Time: _____
 Patient's Contact #s Home: _____ Work: _____ Other: _____
 DOB: _____ SSN: _____
Insurance carrier(s) _____ **Subscriber #** _____ **GRP #** _____ **Auth #** _____
 Exam(s) Requested: (or check below) _____
 Symptoms/Reasons for Studies: _____
Ordering Provider Signature: _____ **Print Name:** _____
 CC: _____ **Phone #:** _____
 If ordering contrast: Date of last BUN/Creatinine _____ Date: _____ BUN/Creatinine _____

This order also grants authorization for Forsyth Medical Center Imaging to perform laboratory procedures on patients as deemed a medical necessity to complete the imaging procedure if no results within 30 days.

Diagnostic Routine

- Chest
- Abdomen (KUB)
- Abdomen with upright
- Bone Density Study
- Other (Specify) _____

Fluoro/Urography (Preps on Back)

- Esophagus / BA Swallow
- UGI
- Small Bowel
- Barium Enema
- Barium Enema with Air
- Other (Specify) _____
- IVP / IVU
- IVP / IVU with Tomo

Mammography

- Screening (The Breast Clinic, Kernersville & WSHC)

Nuclear Medicine (Preps on Back)

- Bone Scan Gastric Emptying Scan
- Thyroid Uptake MUGA Scan
- Thyroid Scan Parathyroid Scan
- Hepatobiliary Scan (Gallbladder)
- Renal Scan w/Lasix
- Renal Scan w/o Lasix

Ultrasound

- Aorta Only
- R Upper Quadrant / Single Quadrant
- Abdomen - Complete
- Renal
- Renal Artery
- Mesenteric Artery
- Pelvis and Transvaginal
- Pelvis Only
- Transvaginal Only
- Thyroid
- Testicular
- Carotid Doppler
- Superficial mass (specify) _____
- Venous Doppler**
 Arm: Rt. Lt. Bil.
 Leg: Rt. Lt. Bil.
- Arterial Exam**
 ABI (screening)
 Lower Extremity PVR
 Upper Extremity PVR

CTA (Angiogram) (Requires w/wo IV Contrast)

- Head (circle of Willis)
- Neck (carotid)
- Chest
- CTPA (Pulmonary Embolism)
- Abdomen
- Aorta runoff
- Aorta (Chest, Abd, Pelvis)
- Renal (Abd, Pelvis)
- Stent Graft Protocol (Abd/Pelvis)

CT Scans

- ADD CONTRAST AT RADIOLOGIST DIRECTION**
- Head without
- Sinuses (full) (w/o)
- Sinuses (4-cut mini) (w/o)
- Soft tissue Neck with
- Chest with contrast
- Chest without
- Chest Interstitial Ds (w/o)
- Abdomen/Pelvis with contrast
- Abdomen with contrast
- Abdomen w/o contrast
- Pelvis with contrast
- Pelvis w/o contrast
- Adrenal (Abd w/wo)
- Renal Mass Protocol (Abd w/wo, Pelvis w/)
- Renal Stone Protocol (Abd/Pelvis no contrast)
- Renal Hematuria Protocol (Abd Pelvis w/wo)
- C-Spine T-Spine L-Spine
- Extremity (specify region) _____

MRI

- ADD Contrast AT RADIOLOGIST DIRECTION**
- Head/Brain
- Sella-Pituitary (head w/wo) Foot R L
- MRA-Brain (w/o) Wrist R L
- (Circle of Willis) IAC's 8th Nerve (head w/wo)
- MRA Carotids (w/wo) Orbits (head w/wo)
- Shoulder R L Breast Bilat (w/wo)
- Spine Survey (Limited C, T, L) Hips R L
- Knee R L
- Ankle R L TMJ
- Soft Tissue Neck (w/wo) ABD (w/wo)
- C-Spine MRCP
- T-Spine L-Spine
- Other (specify) _____

STAT Exam only - Schedule ASAP - no call report

Schedule ASAP - Call Report to:

Additional Comments:



**FOLLOW THESE INSTRUCTIONS
UNLESS OTHERWISE ADVISED BY YOUR PHYSICIAN**

Upper G.I. Series, Stomach: Nothing to eat or drink after 10:00 P.M. the evening prior to the examination.

Small Bowel: Nothing to eat or drink after 10:00 P.M. the evening prior to the examination. Small Bowel exams could take up to 3 hrs. or more.

Colon (Barium Enema): Follow the instructions on Prep package given to you by your Physician.

Colon with Air Contrast: 28 Hour Preparation – Preparation begins at evening meal two days before the exam. Clear soup (any broth, unsweetened fruit juices, black coffee) then follow the instructions on Prep package.

IVP / IVU: Should your Physician recommend a prep: following the instructions on Prep package. Take only the magnesium citrate powder in the package as directed. You may have a liquid diet prior to the examination.

Pelvic Ultrasound: Must have a full bladder. 1 to 1-1/2 hours before appointment, empty bladder and then drink 32 oz. of liquids of your choice. Do not empty bladder again until scan is complete.

Abdomen / Gallbladder / Renal and Aorta Ultrasound: Nothing to eat or drink 8 hours prior to exam.

CT Scans: You may eat a normal diet and take any daily medications. You may be instructed to drink a liquid and wait before the examination begins. Your wait time will depend on the type of exam your physician has ordered. If you are allergic to IV dye – please inform us or your doctors. You may be requested to take pre-meds prior to your scan.

Nuclear Medicine: May require a return visit. Gallbladder/Gastric emptying: Nothing to eat or drink 8 hours prior to exam.

Mammography: Wear blouse with a skirt/slacks. Do not wear deodorant, perfume, lotion, or body talcum powder prior to your exam. If your last mammogram was at another facility, please bring (or have sent) your films and last report to your appointment.

MRI: Please bring any information pertaining to implants or stents that you may have. Also, let us know if there is a possibility of metal fragments in your eye or other body parts. Please inform us if you have any of the following:

- Pacemaker
- Cochlear implants
- Cerebral aneurysm clips
- Any implant made of magnetic materials
- Breast tissue expanders
- Nothing to eat or drink 8 hours to MRCP

If Pregnancy Exists – Consult with your Primary Care Provider.



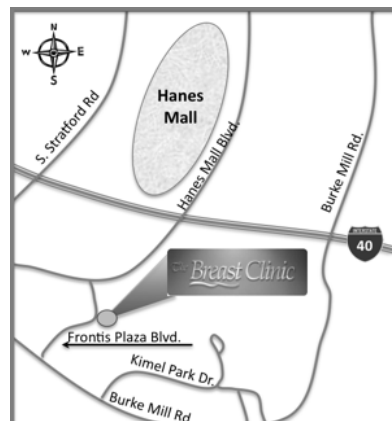
Maplewood Imaging Center
3155 Maplewood Avenue
Winston-Salem, NC 27103
(336) 397-6000
MR,CT, US, X-Ray, Nuclear Medicine
7:00 am – 7:00 pm
Mon-Fri
7:30 am – 1:00 pm Sat
Hours subject to change, please confirm by phone.



Winston-Salem Health Care Radiology
250 Charlois Blvd.
Winston-Salem, NC 27103
(336) 718-1007
8 am – 7:30 pm Mon-Fri (X-ray only)
8 am - 4:45 pm Mon-Fri MR, CT, US, Screening Mammo, Dexa"
9 am – 3:30 pm Sat (X-ray only)
12pm – 4:30 pm Sun (X-ray only)
Hours subject to change, please confirm by phone.



Kernersville Imaging Center
445 Pineview, Suite 100
Kernersville, NC 27284
(336) 397-6102
MR,CT, US, X-Ray, Dexa
7:30 am – 5:00 pm Mon-Fri
Hours subject to change, please confirm by phone.



The Breast Clinic
2025 Frontis Plaza Blvd.
Winston-Salem, NC 27103
(336) 397-6035
Diagnostic & Screening Mammography, Breast US, Special Procedures & MR, Dexa
7:00 am – 5:30 pm Mon-Fri
Hours subject to change, please confirm by phone.

For more information, please visit our website at www.FMCImaging.com