

# Physician Referral Form for Imaging Services

ROUTINE APPOINTMENTS: 570-552-1701

TODAY APPOINTMENTS: 570-552-2DAY (2329)

Patient Name: \_\_\_\_\_ Date: \_\_\_\_\_ Diagnosis ICD9 Code: \_\_\_\_\_

Appointment Date: \_\_\_\_\_ Time: \_\_\_\_\_ Location: \_\_\_\_\_

Referring Physician (Print): \_\_\_\_\_ Additional Copies to: \_\_\_\_\_

Physician Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

## MRI

- Brain [ ] WO [ ] WOW  
Attention [ ] IAC [ ] Pituitary
- Cervical Spine [ ] WO [ ] WOW
- Lumbar Spine [ ] WO [ ] WOW
- Thoracic Spine [ ] WO [ ] WOW
- Facial [ ] WO [ ] WOW
- Neck [ ] WO [ ] WOW
- Orbits [ ] WO [ ] WOW
- TMJ [ ] WO
- MRCP [ ] WO
- Abdomen [ ] WO [ ] WOW
- Pelvis [ ] WO [ ] WOW
- Other: \_\_\_\_\_

## EXTREMITIES

NON CONTRAST UNLESS OTHERWISE INDICATED

- Shoulder R L
- Upper Arm R L
- Elbow R L
- Forearm R L
- Wrist R L
- Hand R L
- Fingers R L
- Hip R L
- Thigh R L
- Knee R L
- Calf R L
- Ankle/Hindfoot R L
- Foot R L
- Toes R L
- Contrast Needed: Yes [ ] WOW

## MR ANGIOGRAPHY

- Head / Brain [ ] WO
- Cartoid [ ] WO [ ] WOW
- Chest [ ] WOW
- Abdomen [ ] WO [ ] WOW
- Abdomen w runoff [ ] WO [ ] WOW
- Pelvis [ ] WO [ ] WOW

## BREAST MRI

- Bilateral Breast [ ] WOW
- Unilateral Breast [ ] WOW  
(Mastectomy only) [ ] Right [ ] Left
- MR guided Breast Bx [ ] Right [ ] Left

## CT SCAN – EXTREMITIES

- Ankle R L
- Femur R L
- Foot R L
- Forearm R L
- Hand R L
- Hip R L
- Humerus R L
- Lower leg R L
- Shoulder R L
- Wrist R L
- Contrast Needed: Yes [ ] IV

## CT SCAN

- Abdomen [ ] oral [ ] WO/WIV
- Abdomen & Pelvis [ ] oral [ ] WO/W IV
- Abd/pelvis (renal st9ne) No oral / No IV
- Chest [ ] WO [ ] IV
- Facial inc mandible
- Head [ ] WO [ ] WOW
- IACS [ ] WO [ ] WOW
- Orbits [ ] WO [ ] WOW
- Pelvis [ ] oral [ ] N
- Sinuses
- Soft Tissue Neck [ ] WO [ ] IV
- Spine – Cervical
- Spine – Thoracic
- Spine – Lumbar
- Temporal Bones
- CTIVP
- CT Colonography

## LABWORK PRIOR TO IV CONTRAST

- BUN / Creat / eGFR

## CT ANGIOGRAPHY

- Circle of Willis (Head)
- Carotids
- Thoracic Aorta
- Renal
- Pelvis
- Pulmonary
- Abdominal
- Abd Aorta & Runoff
- Coronary Arteries (CCTA)

## BIOPSY CT GUIDED

BRING FILMS IF NOT DONE AT SATELLITE LOCATIONS

- CT Guided Biopsy \_\_\_\_\_

## ULTRASOUND

- Abdomen Complete
- Abdomen, Limited (RUQ)
- Aorta
- Gallbladder
- Pelvis Transabdominal
- Pelvis Transvaginal
- OB Transvaginal (before 12 Weeks Gestation)
- Obstetric Transabdominal Less than 14 weeks
- Obstetric Anatomy Greater than 14 Weeks
- Breast R L B
- Renal / Bladder
- Scrotum
- Extremity Non-Vascular R L
- Duplex Carotid
- Venous Extremity (Upper) R L B
- Venous Extremity (Lower) R L B
- Arterial Extremity (Upper) Segmental R L B
- Arterial Extremity (Lower) Segmental R L B

## Neck

- Mass
- Thyroid / Parotid / Lymphnode

## Biopsy

- Lymphnode R L B
- Thyroid Biopsy R L B
- US Guided Breast Needle Localization R L B OR Time \_\_\_\_\_
- US Guided Breast Core Biopsy R L B
- US Guided Cyst Aspiration R L B
- Paracentesis [ ] Diagnostic [ ] Non Diagnostic
- Thoracentesis [ ] Diagnostic [ ] Non Diagnostic
- Other: \_\_\_\_\_

## MAMMOGRAPHY / BREAST IMAGING

- Mammogram R L B
- Screening
- Diagnostic [ ] Bi-lateral [ ] Unilateral R L
- Breast Ultrasound R L B
- Stereotactic R L B
- Needle Localization R L B
- US Guided Breast Mammotome R L B
- US Guided Breast Core R L B
- US Guided Cyst Aspiration R L B

## PET/CT SCANNING

### Skull Base to Thighs

- Bladder
- Breast
- Cervical
- Colorectal
- Esophageal
- Head & Neck excluding CNS, thyroid
- Lung \_\_\_ Small Cell \_\_\_ NSCLC
- Lymphomas: \_\_\_\_\_
- Melanoma
- Myeloma
- Ovary
- Pancreas
- Soft Tissue Sarcoma
- Solitary Pulmonary Nodule
- Stomach
- Testicular
- Thyroid
- All other solid tumors
- Whole Body**
- Melanoma
- Other \_\_\_\_\_
- Brain**
- Brain Tumor / Perfusion
- Alzheimers Disease/Dementia
- Seizure
- Cardiac FDG Viability

**NUCLEAR MEDICINE**

- Thyroid Image Uptake Multiple
- Thyroid CA Imaging
- Parathyroid Imaging
- Adrenal Imaging/MIBG/ I-123
- Lymphoscintigraphy/Lymph node imaging
- Liver Spleen Static only
- Liver Imaging Spect - Hemangioma
- Hepatobiliary \_\_\_\_\_ with CCK \_\_\_\_\_without CCK
- Gastric Emptying Study \_\_\_\_\_ Solid \_\_\_\_\_ Liquid
- GI Blood Loss Imaging
- Intestine Imaging Meckels
- Bone and or Joint \_\_\_\_\_ Limited \_\_\_\_\_ Total  
\_\_\_\_\_3-Phase \_\_\_\_\_Spect
- Myocardial Perfusion Imaging Spect  
\_\_\_\_Stress/delay \_\_\_\_Rest only \_\_\_\_ Viability \_\_\_\_ 2-day

- Muga scan
- VQ Scan (Pulmonary) perfusion/ventilation
- Pulmonary Quantitative
- Cisteronogram
- Renal Flow Function \_\_\_\_\_ Without Pharmaceutical
- Renal Flow Function \_\_\_\_\_ With Pharmaceutical \_\_\_\_\_  
Lasix \_\_\_\_\_ Captopril
- Testicular Imaging w Flow
- Tumor Localization \_\_\_\_\_ Limited \_\_\_\_\_ Spect  
\_\_\_\_\_ Whole Body
- Indium WBC \_\_\_\_\_ Limited \_\_\_\_\_ Wholebody
- Bone Marrow \_\_\_\_\_ Limited \_\_\_\_\_ Wholebody
- Radiopharmiceutical Therapy (or RAI) \_\_\_\_\_ Hyper Oral \_\_\_\_\_  
Ablation Oral \_\_\_\_\_ Mets Oral
- Other \_\_\_\_\_

**RADIOLOGY**

**EXTREMITIES**

- Ankle Complete Right Left
- Ankle Limited Right Left
- Calcaneous (Heel) Right Left
- Clavicle Right Left
- Elbow Complete Right Left
- Elbow limited (2 Views) Right Left
- Femur Right Left
- Finger(s) Right Left  
Attn: \_\_\_\_\_ (Which Finger?)
- Foot Limited (2 Views) Right Left
- Forearm Right Left
- Hand Complete Right Left
- Hand Limited (2 Views) Right Left
- Hip Right Left
- Humerous Right Left
- Knee Complete Right Left
- Pelvis
- Scapula Right Left
- Shoulder Right Left
- SI Joints
- Tibia/Fibula Right Left
- Toe(s) Right Left  
Attn: \_\_\_\_\_ (Which Toe?)
- Wrist Complete Right Left
- Wrist Limited (2 Views) Right Left
- Foot Complete Right Left
- Knee Limited (2 Views) Right Left
- Other: \_\_\_\_\_

**THORAX/ABDOMINAL CAVITY**

- Abdomen AP & Erect
- Abdominal Obstruction Series
- KUB
- Sitzmarker Study / Transit Study
- Chest Frontal Lateral (2 Views)
- Chest Frontal (1 View)
- Ribs Right Left
- Sternum

**SPINES**

- Cervical Spine Complete (5 Views)
- Cervical Spine Limited (AP & Lateral only)
- Cervical Spine with Flexion/Extension only
- Soft Tissue Neck
- Thoracic Spine
- Lumbar Spine complete (5 Views)
- Lumbar Spine Limited (3 Views)
- Lumbar Spine with Flexion/Extension only
- Sacrum Coccyx

**SKULL WORK**

- Skull
- Facial Bones
- Sinuses
- Mandible
- TMJs
- Nasal Bones
- Panorex

**FLUOROSCOPY**

- Barium Enema
- Barium Swallow / Esophagram
- CT IVP
- Cystogram
- Voiding Cystogram
- Gastrografin Enema
- IVP
- Small Bowel Series only
- Speech Therapy Video swallow
- Upper GI
- Upper GI with Small Bowel Follow Thru

**SPECIALTY STUDIES**

- Bone Biopsy
- Bone / Joint Aspiration
- Hysterosalpingogram
- Cervical Myelogram
- Thoracic Myelogram
- Lumbar Myelogram
- Lumbar Puncture
- Vertebroplasty (Lumbar)
- Arthrogram \_\_\_\_\_
- Dexascan
- Bone / Joint Aspiration Attn: \_\_\_\_\_ (Which joint?)
- Arthrogram Attn: \_\_\_\_\_ (Which joint?)
- Other: \_\_\_\_\_

[ ] CT [ ] MR to follow

**Satellite Locations**

**Wilkes-Barre General Hospital  
Imaging Services**  
575 North River Street  
Wilkes-Bare, PA 18704  
570-552-1742

**Thomas P. Saxton Medical Pavillion**  
468 Northampton Street  
Edwardsville, PA 18704  
570-552-4500

**The Women's Imaging Center**  
Thomas P. Saxton Medical Pavillion  
468 Northampton Street  
Edwardsville, PA 18704  
570-552-4505

**Wyoming Valley Imaging Center**  
345 North Pennsylvania Avenue  
Wilkes-Barre, PA 18702  
570-829-5413

**Wilkes-Barre General Hospital  
Mountain Top Campus**  
239 South Mountain Boulevard  
Mountaintop, PA 18707  
570-715-7900

**Back Mountain Medical Center**  
100 Upper Demunds Road  
Dallas, PA 18612  
570-674-9033

**Carbondale Outpatient Center**  
150 Brooklyn Street  
Carbondale, PA 18407  
570-281-1350

**Center for Diagnostic Imaging**  
190 Welles St, Suite 2  
Forty-Fort, PA 18704  
570-288-0400