



# DIAGNOSTIC IMAGING REFERRAL FORM

Name of Patient \_\_\_\_\_ D.O.B \_\_\_\_\_

Home Phone Number \_\_\_\_\_ Work Phone Number \_\_\_\_\_

Diagnosis/Signs & Symptoms (Do Not Use "Rule Out") \_\_\_\_\_

Primary Physician (Please PRINT) \_\_\_\_\_ Address \_\_\_\_\_

Insurance Name \_\_\_\_\_ **\*\*Required for Medicare Patients Only When Order CT Scans**

Referring Physician (Please PRINT) **NPI#\*\*** \_\_\_\_\_ Physician's Signature \_\_\_\_\_

**CDSM HCPCS Code\*\*** \_\_\_\_\_ **AUC Modifier\*\*** \_\_\_\_\_ **CDSM Consult#\*\*** \_\_\_\_\_

Fax report delivery  Call immediate verbal results/fax report to follow \_\_\_\_\_

Prior authorization number(s) \_\_\_\_\_

### RADIOGRAPHIC EXAMS

- Chest  Abdomen/KUB  Acute Abd
- Spine  Cervical  Thoracic  Lumbar
- Orthopaedic \_\_\_\_\_  RT  LT  Bilateral
- Sinuses  Abdomen Flat & Upright
- Other \_\_\_\_\_

### RADIOGRAPHIC SPECIAL EXAMS

- Allergies to X-Ray Contrast  Yes, notify  No
- Barium Swallow  Barium Enema (prep required)
- Air Contrast Barium Enema (prep required)
- GI Air Contrast (prep required)
- Small Bowel may take up to 4 hours (prep required)
- IVP (prep required)
- Arthrogram (specify joint) \_\_\_\_\_  RT  LT
- Bone Density/Osteoporosis Study
- Water Soluble Enema
- Other \_\_\_\_\_

### ULTRASOUND EXAMS

- Abdomen (prep required)  Kidneys (prep required)
- Gall Bladder (prep required)  Aorta (prep required)
- Pelvis with endovaginal if necessary (prep required)
  - Pregnancy (less than 14 weeks)
  - Pregnancy (greater than 14 weeks)
- Thyroid  Scrotum  Sonohysterogram
- Carotid Doppler
- Arterial Doppler  Upper  Lower
- Venous Doppler  Upper  Lower
  - Bilateral  RT  LT
- Other \_\_\_\_\_

### CT SCAN *computed tomography*

- Allergies to X-Ray Contrast/Dye  Yes, notify  No
- Brain  With  Without  CT Colonography
- Sinus  With  Without  With  Without
- Soft tissue neck  With
- Chest  With  Without  CT Enterography
- Abdomen (prep required)  With IV  Without IV
- Renal stone protocol
- Spine with MRP  Cervical  Thoracic  Lumbar
- Joint/Extremity (designate)  RT  LT
  - Bilateral \_\_\_\_\_
- CT Angiography (specify area) (prep required) \_\_\_\_\_

### FOCUS ON WOMEN

- Screening Mammogram
- Diagnostic Mammogram (requires diagnosis)
  - Ultrasound if necessary
  - (Refer to RAPA/St. Vincent Breast Center Worksheet specific for diagnostic breast imaging prior to scheduling.)*
- Breast Ultrasound
- Breast procedures-contact Breast Center for information
- Core biopsy, aspirations, ductogram, pre-op localization

### SPECIAL SERVICES AND CONTACT NUMBERS

- EVLT for varicose veins (686-2681)
- Sclerotherapy for spider veins (686-2681)
- PET scanning (552-2100)
- Vertebroplasty (552-2982)
- Uterine Fibroid Embolization(552-2982)

Radiology Associates, P.A.  
Doctors Building Imaging Center  
Suite 101  
500 S. University  
Little Rock, AR 72205  
Scheduling: 501-686-2621  
Fax: 501-614-7509

**CHI St. Vincent**  
**St. Vincent Breast Center**  
In partnership with Radiology Associates, PA

St. Vincent Breast Center  
Doctors Building  
Suite 114  
500 S. University, AR 72205  
Scheduling: 501-661-9766  
Fax: 501-975-4666

### Date of Procedure

### Arrival Time

### IMPORTANT

**If you cannot meet your appointment, please call 501-686-2621 24-hours in advance.**

RAPA accepts most major insurance plans, including Blue Cross Blue Shield products, Aetna, Cigna United Health Care and QualChoice QCA. Prior authorization may be required for HITECH or Interventional Imaging.

*RAPA employees are unable to watch unattended children. Please make provisions for childcare, if necessary, prior to coming to our office for your radiologic exam.*

**Please bring all insurance information to each visit.**

*Most major insurers will pay for radiology examinations, although some require prior authorization for certain procedures. Patients may be required to pay at the time of service depending on the type of insurance coverage. You should check your benefits with your insurers at least a day before the exam.*

*Your insurance policy is a contract between you and your insurance company. As a courtesy to you, we will be glad to file your insurance claims. Bring your insurance card with you when you come for the exam. You will be responsible for all services that are not covered by your insurance.*

**If you have any questions about your coverage, you may call our business office at 501-644-3914 or 888-390-7272.**

# PREPARATIONS

To learn more about your exam go to [www.rapaxray.com](http://www.rapaxray.com)

## □ RADIOLOGIC EXAMS

Barium Enema/Air contrast Barium Enema: requires bowel prep. If you receive bowel prep instructions from your referring physician, you may use them. Otherwise, contact RAPA for special bowel prep instructions.

IVP/GI/Small Bowel Series: Do not eat, drink or chew gum after midnight

Bone Density scan: No IV contrast, Barium Studies or Nuclear Medicine studies for 72 hours prior to study. Stop calcium supplements 24-hours prior to study

*HSG, Arthrograms or IVPs should be screened for allergies to X-ray contrast. In some cases pre-medication may be necessary. Recent (last 3 months) BUN and Creatinine will be necessary for patients 65 or over, insulin-dependent diabetics, or a history of renal insufficiency.*

## □ ULTRASOUND EXAMS

Ultrasound of Abdomen (Gall Bladder, Pancreas, Liver, Aorta) Do not eat, drink or chew gum after midnight.

Thyroid/Scrotum: No preparation required

Pelvis, Pregnancy less than 14 weeks: **Patients must have a full bladder.** You should finish drinking 48 ounces of fluid 1 hour prior to your appointment time. Patients should not empty their bladder after they have started drinking.

Pregnancy greater than 14 weeks: **Patients must have a full bladder.** You should drink 32 ounces of fluid 1-hour prior to appointment time.

**Do not empty bladder after starting to drink.**

Vascular Studies/Carotid, Arterial and Venous Doppler: No preparation required

Renal: No food 2 hours before appointment

## □ CT EXAMS (computed tomography)

All CT scans of the brain, neck, chest, abdomen, pelvis and CT angiography potentially involve the administration of intravenous contrast/dye. These patients should not eat or drink 2 hours prior to appointment time. Patients scheduled for these studies should be screened for the following as additional prep may be required:

- Age 65 or over (BUN and Creatinine within the last 3 months)  
Insulin-dependent diabetic (BUN and Creatinine within the last 3 months)
- History of renal insufficiency (BUN and Creatinine within the last 3 months)
- History of allergy to X-ray contrast (pre-medication may be required)
- Diabetics on Metformin, Glugophage or Glucovance (will need referring physicians to discontinue these meds for 48 hours following IV contrast)

CT Extremities, Joints, and Spine generally do not require IV contrast and therefore no special preparation is necessary.

## □ MAMMOGRAPHY

Screening or Diagnostic: No powder, perfume or deodorant in underarm area

History of previous mammograms: When? Where?

Breast Ultrasound: No preparation required

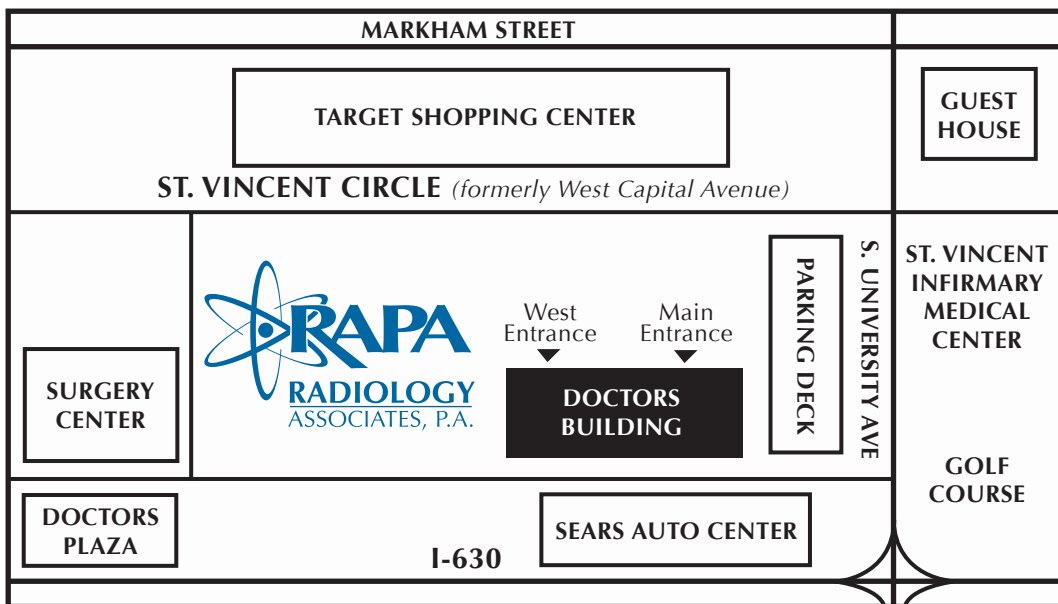
For Aspirations/Biopsies: contact office for special instructions.

## □ SPECIAL SERVICES

The Contact Numbers listed on the front page will be able to supply any necessary preparation instructions and/or information necessary.

## DOCTORS BUILDING

RAPA's Imaging Center/St. Vincent Breast Center Directions



**From I-630 West (from downtown),** take Exit 5A (staying in your far Left lane). Follow the exit ramp onto University Ave. Once on University Ave, travel to the next traffic light and turn left onto St. Vincent Circle. The Doctors Building is the first building on your left. RAPA's Imaging Center and the St. Vincent Breast Center are located on the first floor.

**From I-630 East (towards downtown),** take Exit 5 to University Ave. Turn left onto University Ave. and travel to the second traffic light, turning left onto St. Vincent Circle. The Doctors Building is the first building on your left. RAPA's Imaging Center and the St. Vincent Breast Center are located on the first floor.

RAPA's Imaging Center is immediately to the right upon entering the Doctors Building in Suite 101. For appointments with St. Vincent Breast Center, turn right past the elevators and travel to the end of the hallway. The Breast Center is on the left in Suite 114.

Should you have any trouble getting to your RAPA Imaging Center appointment, please call 686-2621.

Should you have trouble getting to your St. Vincents Breast Center Appointment, please call 661-9766.