



GROSSMAN IMAGING CENTERS

Tax ID#95-3636521

805-988-0616 • Fax 805-988-0997

REQUEST FOR TOTAL BODY PET/CT SCAN

Date of Exam

Time of Exam

Scheduled by

1. Patient Name: _____

D.O.B. _____ Height _____ Weight _____

Home Phone _____ Cell Phone _____

2. Ordering Physician _____

3. EXAM REQUESTED PET/CT And

Diagnostic Contrast CT of: Head Abdomen Neck Pelvis Chest

4. Diagnosis _____ ICD9 _____

Proven Pathologically Unproven

5. CPT Code: 78815 - Head to Thigh 78816 - For Melanoma Head to Toe

78608 - Brain (Alzheimer's & Dementia, etc.)

6. Previous Correlative Exams: CT MRI PET

Date of Exam: _____

Institution where CT, MRI, or PET was performed:

Grossman Imaging Center Community Memorial Hospital

Ventura Coast Imaging Pueblo Radiology

St. John's Hospital Other:

7. Insurance _____ Authorization

8. **Please fax copies of pathology, ** correlative exam reports, ** and insurance card with this form to: (805) 981-0766**

9. **All correlative CT, MRI and/or PET films should be present at time of procedure in order to facilitate a timely PET interpretation.**

10. **For Contrast CT —**

Results from BUN & Creatinine within last 30 days _____ / _____

Physician Signature _____

Contact at Doctors Office: _____

***Please note: Absence of previous reports will delay results.*

DIRECTIONS

Take 101 freeway to Rice Road exit, go south 1 block to Gonzales Road, turn right 2 blocks past Outlet Center Dr. to 2151 Gonzales Rd., Suite #101.

DIRECCIONES

Tome el autopista 101 hasta la salida de Rice Road, vaya al sur una cuadra a Gonzales Road, dos cuadras después doble a la derecha a 2151 E. Gonzales Rd., Suite #101. (oficina)

