


TAMPA
 5107 North Armenia Avenue
 Tampa, FL 33603
Telephone: (813) 874-2999

ROSE RADIOLOGY

 "Make Quality Radiology Your Choice"TM
Scheduling Fax (813) 901-4888
Online Prescription: MRIROSE.COM

KENNEDY
 2605 West Kennedy Boulevard
 Tampa, FL 33609
Telephone: (813) 876-7200

Patient Name: _____ Date of Birth: _____ Today's Date: _____

Phone # (Home): _____ Phone # (Work): _____ Phone # (Cell): _____

Clinical Diagnosis / Symptoms (Required): _____

Appt. Date: _____ Time: _____ Primary Care Physician's Phone #: _____

QUICK SCHEDULE: Obtain Insurance Authorization Call Patient to Schedule Wet Read

BELOW PLEASE INDICATE THE TYPE OF STUDY REQUIRED AND THE PATIENT'S DIAGNOSIS

3.0 T MRI

Tampa ONLY

- With & Without Contrast
- With Contrast Only
- Without Contrast
- MRI BRAIN
- MRI ORBITS
- MRI IAC'S
- MRI SOFT TISSUE NECK
- MRI PITUITARY
- MRI BILAT TMJ
- MRI C-SPINE
- MRI T-SPINE
- MRI L-SPINE
- MRI CHEST
- MRI ABDOMEN
- MRI PELVIS
- MRI LIVER
- MRI SHOULDER R or L
- MRI ELBOW R or L
- MRI WRIST R or L
- MRI HAND R or L
- MRI HIP R or L
- MRI KNEE/JNT R or L
- MRI ANKLE R or L
- MRI FOOT R or L
- MYELO - C-SPINE
- MYELO - T-SPINE
- MYELO - L-SPINE
- ARTHROGRAM R or L
- MRI BREAST R or L
- OTHER - Please Specify: _____

MRA

With & Without Contrast

With Contrast Only

Without Contrast

- MRA HEAD
- MRA CAROTIDS
- MRA PULMONARY
- MRA LOW EXT/PELVIS
- MRA UP EXT W/RUNOFF
- Please Specify: _____

- MRA ABD-AORTA
- MRA T-SPINE-AORTA
- MRA SUBCLAVIAN
- MRA RENAL
- MRA Other
- Please Specify: _____

- MRV
- Please Specify: _____

MRCP

16 SLICE CT SCAN w/MPR
Tampa ONLY

With & Without Contrast

With Contrast Only

Without Contrast

- CT HEAD/BRAIN
- CT ORBITS
- CT IAC'S
- CT SOFT TISSUE NECK
- CT SINUS
- CT FACIAL BONES
- CT CHEST
- CT ABD/PELVIS
- CT C-SPINE

- CT T-SPINE
- CT L-SPINE
- CT SHOULDER R or L
- CT ELBOW R or L
- CT WRIST R or L
- CT HAND R or L
- CT HIP R or L
- CT KNEE R or L
- CT ANKLE R or L
- CT FOOT R or L
- OTHER - Please Specify: _____

- TOES 2V R or L
- HAND 3V R or L
- WRIST 3V R or L
- FOREARM 2V R or L
- SHOULDER 3V R or L
- ABD 2V (Flat & upright)
- ABD 1V KUB
- BONE AGE
- HUMERUS R or L
- BONE SURVEY
- OTHER - Please Specify: _____

- US SCROTUM
- ABI
- US EXTR NON-VASC
- US CAROTID BILAT
- US LWR EXT ART BILAT
- US LWR EXT ART UNI
- US UPPER EXT ART BILAT
- US UPPER EXT ART UNI
- US VEN EXT BILAT
- US VEN EXT UNI
- US ABD/PELVIS LIMIT DUPLEX
- US AORTIC/IVC
- OTHER - Please Specify: _____

CT ANGIOGRAPHY w/MPR

Tampa ONLY

- HEAD
- NECK/SOFT TISSUE NECK
- CHEST
- PELVIS
- UPPER EXT. R or L
- LOWER EXT. R or L
- ABDOMINAL
- ABD, AORTA/PELVIS & BILAT I.A. RUNOFF
- CT THORAX
- CT OTHER - Please Specify: _____

PET/CT

Tampa ONLY

- BREAST (STAGING)
- LYMPHOMA
- HEAD & NECK
- LUNG (SINGLE PULMONARY NODULE)
- LUNG (STAGING) (NON SMALL CELL)
- CARDIAC VIABILITY
- COLORECTAL (STAGING)
- ESOPHAGEAL (STAGING)
- MELANOMA (STAGING)
- THYROID (STAGING)
- CERVICAL (STAGING)
- BRAIN - REFRACTORY SEIZURES
- BRAIN - ALZHEIMER'S
- BRAIN - LIMITED
- OTHER - Please Specify: _____

DIGITAL X-RAY

- SINUS
- SKULL 4V
- IVP
- CHEST 2V
- CHEST W/OB
- CHEST 4V MIN
- RIB 2V UNIL R or L
- C-SPINE 2/3V
- C-SPINE 4V MIN
- C-SPINE FLEX/EXT
- C-SPINE 7 SERIES
- T-SPINE 2V
- T-SPINE STANDING SCOLIOSIS SERIES
- T-SPINE 3V
- L-SPINE 2/3V
- L-SPINE 4V (w OBL)
- AP PELVIS
- HIP 2V R or L
- FEMUR 2V R or L
- KNEE 3V R or L
- TIB/FIB R or L
- ANKLE 3V R or L
- FOOT 3V R or L
- CALCANEUS R or L

INTERVENTION

Tampa ONLY

- MR ARTHROGRAM
- Please Specify: _____
- CT MYELO - C-SPINE
- CT MYELO - T-SPINE
- CT MYELO - L-SPINE
- US HEAD/NECK
- US BREAST(s)
- US ABD COMPLETE
- US ABD LIMITED
- US RENAL/AORTA
- US THYROID
- US PREG COMPLETE
- US PREG MULTIPLE
- US PREG FOLLOW-UP
- US BIOPHYSICAL
- US TRANSVAGINAL
- US PELVIC COMPLETE

DIGITAL MAMMOGRAPHY

Tampa ONLY

- SCREENING
- DIAG-UNILATERAL R or L
- DIAG-BILATERAL
- US IF INDICATED
- FOLLOW-UP: R L
- IMPLANTS: Yes No
- ADDITIONAL VIEW
- Please Specify: _____

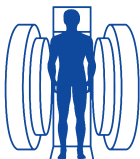
***Please bring previous films**

NUCLEAR MEDICINE
Tampa ONLY

- BRAIN SPECT
- WHOLE BODY BONE SCAN
- BONE SCAN WITH SPECT
- HIDA SCAN
- HIDA SCAN WITH GBEF
- MUGA SCAN (TO ASSESS LVEF)
- LIVER/SPLEEN SCAN
- THYROID SCAN ONLY
- I-131 THYROID SCAN/UPTAKE
- I-123 THYROID SCAN/UPTAKE
- PARATHYROID SCAN
- RENOGAM W/LASIX
- DMSA RENAL SCAN
- VQ
- RBC LIVER (HEMANGIOMA)
- GALLIUM SCAN
- GASTRIC EMPTYING
- OTHER - Please Specify: _____

FOR UPRIGHT OPEN MRI

Kennedy ONLY
Upright MRI Protocol



With Flexion/Extension?
 Yes No

With Contrast?
 Yes No

- Brain
- Cervical**
- Seated **OR** Standing
- Thoracic**
- Seated **OR** Standing
- Lumbar**
- Seated **OR** Standing
- Shoulder** Right Left
- Hip** Right Left
- Knee** Right Left
- Other Region**
- Specify _____

Physician's notes / other procedures

Clinical History / DX / code: _____

THIS EXAM IS MEDICALLY NECESSARY FOR THIS PATIENT.

Physician Signature: _____

Please Print Name: _____

See Reverse Side for Important Information

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5107 North Armenia Avenue
Tampa, FL 33603

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Scheduling Fax: (813) 901-4888
Toll Free: 1-877-MRI-ROSE

- **3T MRI/MRA**
- **PET/CT**
- **16 SLICE CT/CTA**
- **DIGITAL X-RAY**
- **NUCLEAR MEDICINE**
- **DIGITAL MAMMOGRAPHY**
- **ULTRASOUND**
- **FLUOROSCOPY/INTERVENTION**

Online Prescription: MRIROSE.com

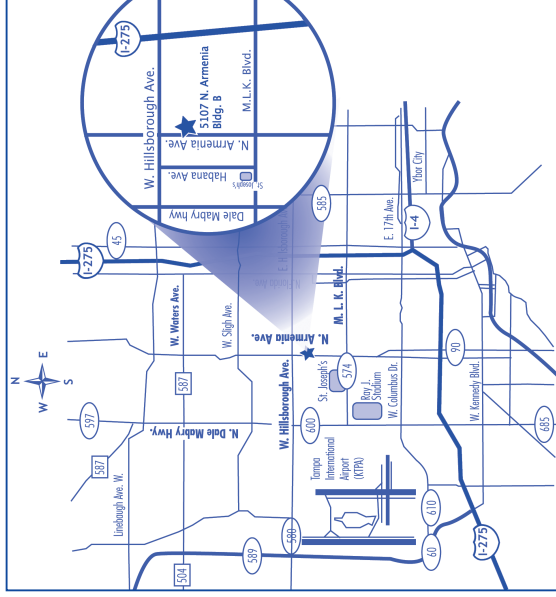
ROSE RADIOLOGY - ON KENNEDY

2605 West Kennedy Boulevard
Tampa, FL 33609

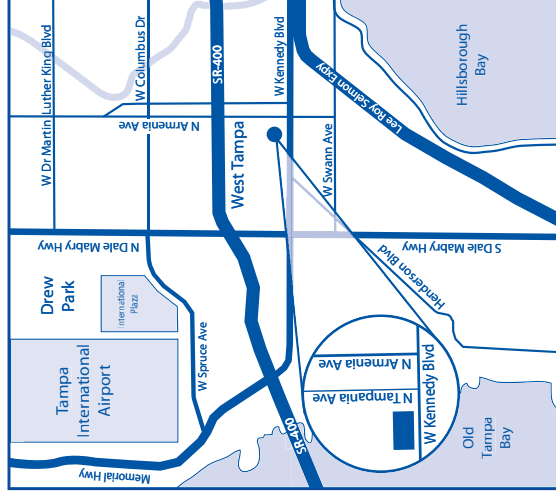
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Toll Free: 1-877-MRI-ROSE

- **UPRIGHT OPEN MRI**
- **DIGITAL X-RAY**
- **ULTRASOUND**

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(Located on Armenia Avenue between MLK Boulevard and Hillsborough Avenue)



(Located on the North side of Kennedy, just West of Armenia and East of Dale Mabry)

Diagnosis Codes (ICD-9)

- 441.4 A.A.A.
- 789.00 ABDOMEN PAIN
- 789.07 ABDOMEN PAIN GENERALIZED
- 461 ACUTE SINUSITIS
- 711.8 ARTHRITIS DIS
- 724.5 BACK PAIN
- 723.4 BRACHIAL NEURITIS
- 490 BRONCHITIS
- C.H.F.
- 428.0 C.H.F.
- 592.0 CALCULUS KIDNEY
- 429.3 CARDIOMEGALY
- 722.4 C-SPINE DISC DEGENERATION
- 722.0 C-SPINE DISC DISPLACEMENT
- 721.0 C-SPINE SPONDYLOSIS
- 723.0 C-SPINE STENOSIS
- 723.1 C-SPINEGIA
- 786.6 CHEST SWELLING/MASS
- 574 CHOLELITHIASIS
- 473.9 CHRONIC SINUSITIS
- 564.0 CONSTIPATION
- 786.2 COUGH
- 436 CVA
- 611.72 DIAG MAMMO
- 780.4 DIZZINESS/GIDDINESS
- 785.6 ENLARGEMENT LYMPHNODES
- 780.6 FEVER
- 784.0 HEADACHE
- 599.7 HEMATURIA
- 401.9 HYPERTENSION
- 959.5 INJURY-FINGER
- 959.01 INJURY-HEAD
- 717.9 INT DERANG KNEE
- 718.81 INT DERANG SHOULDER
- 431 INTER HEMORRHAGE
- 719.06 JOINT EFFUSION
- 722.10 LUM DISC DISPLACEMENT
- 724.2 LUMBAGO
- 847.2 L-SPINE SPRAIN
- 724.4 LUMBOSACRAL NEURITIS
- 202.81 LYMPHOMA
- 346.9 MIGRAINE
- 355.9 MONONEURITIS
- 847.0 NECK SPRAIN
- 729.2 NEURALGIA/NEURITIS
- 357.4 NEUROPATHY
- V71.1 OBSERVATION-LESION
- 433.10 OCC CA W/O INFARCTION
- 433.3 OCC MULTI W/O INFARCTION
- 715.96 OSTEOARTHRITIS KNEE
- 715.91 OSTEOARTHRITIS SHOULDER
- 715.9 OSTEOARTHRITIS-NOS
- 719.43 PAIN-FOREARM
- 719.44 PAIN-HAND
- 719.46 PAIN-LEG
- 729.5 PAIN-LIMB
- 719.45 PAIN-PELVIS
- 719.41 PAIN-SHOULDER
- 724.1 PAIN-T-Spine
- 786.5 PAIN-CHEST
- 518.3 PUL EDEMA
- 786.09 RESPIRATORY ABNORMALITY
- 714.0 RHEUMATOID ARTHRITIS
- 727.61 ROTATOR CUFF INJURY
- 724.3 SCIATICA
- V76.12 SCREEN BREAST
- 782.0 SKIN SENSATION DISTURB
- 336.9 SPINAL CORD DISEASE
- 724.02 SPINAL STENOSIS
- 756.12 SPONDYLOLISTHESIS
- 840.9 SPRAIN-ARM/SHOULDER
- 840.4 SPRAIN-ROTATOR CUFF
- 784.2 SWELLING HEAD/NECK
- 729.81 SWELLING-LIMB
- 780.2 SYNOPE/COLLAPSE
- 886.0 TEAR-KNEE
- 307.81 TENSION HEADACHE
- 435.9 TRANS CEREB ISCHEMIA
- 350.1 TRIGEMINAL NEURALGIA
- 593.4 URETERIC OBSTRUCTION
- OTHER

PET/CT *TAMPA ONLY

Other Indications:

- Ovarian Cancer
- Uterine Cancer
- Prostate Cancer
- Bladder Cancer
- Hepatocellular Cancer
- Cholangiocarcinoma
- Pancreatic Cancer
- Renal Cell Cancer
- Testicular Cancer
- Bone Tumor
- Brain Tumor
- Epilepsy
- Other Dementia (Multi-Infarct, post-Traumatic, HIV, Frontal Lobe, Pick's Disease, Huntington's Disease)
- Other

Medicare Approved Indications

- Alzheimer's Disease
- Cardiac/Myocardial viability
- Primary or initial diagnosis prior to revascularization
- After inconclusive SPECT
- Breast Cancer (Stating or Restaging)Cervical Cancer
- Colorectal Cancer
- Esophageal Cancer
- Head and neck – Excluding CNS and thyroid
- Single Pulmonary Nodule (SPN)
- Lung Cancer – Non-small cell
- Lymphoma
- Melanoma
- Refractory Seizures
- Thyroid Cancer

Please Select One: Diagnosis Staging Restaging