



# Northland Radiology

Diagnostic Imaging Center

20905 Greenfield, Suite 105 • Southfield, MI 48075  
Tel: (248) 569-0296 • Fax: (248) 569-3390

## Diagnostic Imaging Requisition Form v.1.1.17



**Same Day/Next Day  
Appointments Available**

Date	Referring Physician	Phone	Send Report To:	<b>ARRIVE 30 MIN PRIOR TO APPT. TIME</b>
Patient Name			Fax:	
Patient Phone		DOB	Preliminary Diagnosis	<b>BRING THIS SLIP WITH YOU</b>

### OPEN MRI / MRA

☐ MRI ☐ MRA Body Parts: \_\_\_\_\_

\_\_\_ without Contrast  
\_\_\_ with Contrast  
\_\_\_ with and without Contrast  
**\*550 lb  
Wt Limit**

### 64-Slice CT/CTA

☐ 64-Slice CT Scan ☐ CTA Body Parts: \_\_\_\_\_

\_\_\_ without Contrast  
\_\_\_ with Contrast  
\_\_\_ with and without Contrast  
**\*450 lb  
Wt Limit**

### Nuclear Stress Testing

☐ Nuclear Stress Test w/ Functions (SPECT) ☐ Persantine w/ Stress

Patients who do not show up for their appointments and fail to give 24-hr notice will be charged \$200

### Echocardiogram and Vascular Doppler

☐ 2-D Echocardiogram w/ Colorflow Doppler ☐ Stress Echocardiogram ☐ Arterial Doppler w/ ABI \_\_\_ Upper \_\_\_ Lower  
☐ Carotid Doppler Duplex Colorflow ☐ Transcranial Doppler ☐ Venous Doppler \_\_\_ Upper \_\_\_ Lower  
☐ EKG

### Ultrasound

☐ Abdominal ☐ Retroperitoneal ☐ Transvaginal / Pelvic ☐ OB / Pelvic ☐ Prostate / Transrectal  
☐ Thyroid ☐ Breast ☐ Soft Tissue Mass ☐ Rotator Cuff ☐ Aortic Doppler  
☐ Renal Doppler ☐ Abdominal Doppler Specify \_\_\_\_\_ ☐ Other: \_\_\_\_\_

### Mammogram and Breast Health

☐ Digital Mammogram ☐ Magnification Views ☐ Breast Biopsy  
☐ Cone Compression ☐ Breast Ultrasound ☐ Ultrasound-Guided Biopsy Consult  
\_\_\_ Check here if you give permission for further diagnostic testing as recommended by Radiologist

### X-Ray

**Walk-Ins Welcome**

Body Parts: \_\_\_\_\_

### Neurology

☐ EMG w/ NCV and Consult  
☐ VAT Balance Test

### Bone Densitometry

☐ DEXA Scan

<b>Appointment</b>	<b>Please Indicate if Patient has</b>	<b>Reason For Ordering Test / Medical Necessity</b>
Date _____ Time _____	<input type="checkbox"/> BCN <input type="checkbox"/> PPO <input type="checkbox"/> HMO (other)	_____ Physician Signature
		_____ Date

We are committed to protecting our patients and staff from COVID-19 and other infections. We require patients and guests to wear masks throughout their visit to our facility and we administer temperature checks for all entrants. We thank you for your help in keeping everyone safe.

## Preparations for Adult Patients

If patient is: a child, diabetic, suspected of having a bowel obstruction, or some other special problem, consult your physician or radiologist for any changes in the preparations below. Please call with any questions or concerns pertaining to the preparations.

### Nuclear Medicine

#### Treadmill Stress/Cardiolite Stress Test

This test looks at the vessels surrounding your heart to make sure they are receiving adequate blood flow. The test takes approximately 3 hours. You should have nothing to eat or drink for 4 hours prior to your appointment time. If you are diabetic, you may have a light breakfast 2 hours prior to test consisting of toast, oatmeal or cereal and juice. No caffeine 12 hours prior to test. No smoking the day of test. Wear comfortable clothing and shoes to walk on the treadmill. Bring reading material as there are times when we need to wait for the injection to circulate. We will be placing an IV access line in a vein of your arm to give you 2 injections of a small amount of a radioactive material called a tracer. This is not a dye and does not contain iodine. There are no side effects or reactions to this injection. It will not interfere with any medications you are taking. We prefer that you do not take beta-blocker medication the day of your test; however, please consult your physician before discontinuing any medications.

#### Persantine Stress Test

**Please call (248) 569-0296 for preparatory instructions.**

#### HIDA (Gallbladder)

- a. Nothing by mouth 4 hours before examination
- b. No Smoking or Gum Chewing

#### MUGA (45 min)

No preparation necessary.

### Open MRI / MRA

Wear comfortable loose clothing or patient gowns will be provided. Remove all metal or metallic objects from your body before scanning, such as jewelry, watches, snaps, zippers, safety pins, keys or credit cards.

\*550 lb  
Wt Limit

### Digital Mammography

- a. Do not use any deodorant, body powder or lotions the day of the exam.
- b. Take a sudsy shower morning of exam
- c. Bring previous (if any) mammogram files

### EMG & Nerve Conduction

- a. Do not use any body powder or lotions the day of the exam.
- b. Take a sudsy shower the morning of the exam.

### Ultrasound

#### Abdominal / Retroperitoneal

- a. Nothing by mouth 6 hours before exam
- b. No smoking or chewing gum

#### Pelvic / Gynecological

- a. Drink 40 oz. of liquid 90 minutes before the exam.
- b. **DO NOT URINATE UNTIL AFTER THE EXAM**

#### Prostate

Fleet Enema 2 hours prior to exam

### 64-Slice CT/CTA

**Please Call (248) 569-0296 for full preparatory instructions**

If the patient is diabetic they should stop taking Glucophage, Glucovance or Metformin for 48 hours after the CT exam and should have a BUN / Creatinine check before resuming their medication.

#### Head and Facial

- a. No food or drink at least 2 hours prior to exam
- b. No oral contrast given for this exam
- c. IV required

#### Neck / Chest

- a. No food or drink at least 4 hours prior to exam
- b. No oral contrast given for this exam
- c. IV may be required

#### Abdominal / Pelvic

- a. No food or drink at least 12 hours prior to exam
- b. You'll be given 1-2 bottles of oral contrast to be taken 1 hour before this exam
- c. Finish drinking within 10 minutes
- d. IV required
- e. No barium studies at least 48 hours before exam

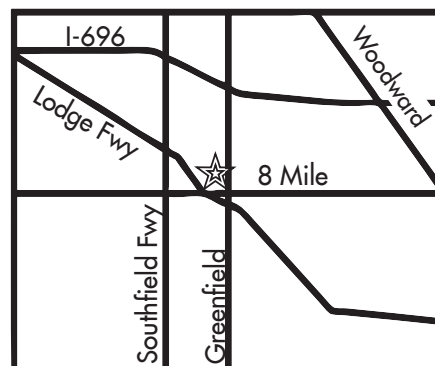
#### Spine

- a. Before the CT exam, patient must have an AP and lateral of the applicable portion of the spine.
- b. No prep for this examination
- c. If you've had neck or spine x-rays some place else, please bring them with you.
- d. No barium studies at least 48 hours before exam

#### Upper / Lower Extremities

NOTE: No special prep required unless diagnosis is for "rule out tumor"; then use the following prep

- a. No food or drink at least 4 hours prior to exam
- b. No oral contrast given for this exam
- c. IV may be required



#### Northland Medical Building

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