ALFA DIAGNOSTIC

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PATIENT INFORMATION

NAME:	**DIAGNOSIS**
DOB:	
TEL.:	**SPECIAL INSTRUCTION:**
	Results ☐ **Routine** ☐ **STAT**

LAB. GFR: **CREATININE:** **BUN**

REFERRING PHYSICIAN

NAME: **TEL.:** **FAX:** **SIGNATURE**

☐ The patient has a "emergency medical condition" (EMC) as defined in Florida Motor Vehicle No-Fault Law, Florida Statutes Senctions 627.730-627.7405

X-RAY

Walk in accepted Please call before arrival

		R	L
☐	Skull		
☐	Facial Bones		
☐	Orbit		
☐	Eyes		
☐	Nasal Bones		
☐	Sinus		
☐	Mandible		
☐	TMJ		
☐	Soft Tissue Neck		
☐	Cervical		
☐	Thoracic		
☐	Lumbar		
☐	Scoliosis Series		
☐	Chest		
☐	Ribs		
☐	Sternum		
☐	Abdomen (KUB)		
☐	Clavicle		
☐	AC Joint		
☐	Shoulder		
☐	Scapula		
☐	Arm		
☐	Elbow		
☐	Forearm		
☐	Wrist		
☐	Hand/Fingers		
☐	Pelvis		
☐	Hip		
☐	Sacrum / Coccyx		
☐	SC Joints		
☐	Femur		
☐	Knee		
☐	Tib / Fib		
☐	Ankle		
☐	Heel		
☐	Foot/Toes		
☐	Bone Age		
☐	Bone survey		
☐	Other		

3D MAMMOGRAPHY

		R	L
☐	Screening		
☐	Diagnostic		
☐	Biopsy		
☐	Other		

BONE DENSITY

☐	Spine and Hip

VASCULAR ULTRASOUND

		R	L
☐	Carotid		
☐	UL Arterial		
☐	LE Arterial		
☐	UL Venous		
☐	LE Venous		
☐	Ankle Brachial Index (ABI)		
☐	Renal artery		
☐	Aorta		
☐	Echo		
☐	Other		

CT

		W/O	W
☐	Head/Brain		
☐	Pituitary/Sella		
☐	Orbits		
☐	Temporal Bone/IAC		
☐	Sinus		
☐	Maxillofacial		
☐	Cervical		
☐	Thoracic		
☐	Lumbar		
☐	Neck soft tissue		
☐	Chest		
☐	Abdomen		
☐	Pelvis		
☐	Abdomen & pelvis		
☐	Kidney (Urogram)		
☐	Liver (Triple phase)		
☐	Enterography		
☐	Colongraphy		

	Upper Limb	W/O	W
☐			

		R	L
☐	Humerus		
☐	Forearm		
☐	Hand		
☐	Shoulder Joint		
☐	Elbow Joint		
☐	Wrist Joint		

	Lower Limb	W/O	W
☐			

		R	L
☐	Femur		
☐	Lower Leg		
☐	Foot		
☐	Hip Joint		
☐	knee Joint		
☐	Ankle Joint		

CT ANGIOGRAPHY

☐	Head/Brain		
☐	Neck/Carotid		
☐	Chest/Aorta		
☐	Coronary Arteries		
☐	Calcium score		
☐	Abdomen		
☐	Pelvis		
☐	Renal		
☐	Upper Extremity	R	L
☐	Lower Extremity	R	L
☐	Runoff		

ULTRASOUND

☐	Abdomen complete		
☐	Abdomen Limited		
☐	Renal/Bladder		
☐	Pelvis		
☐	Transabdominal		
☐	Transvaginal		
☐	Transrectal		
☐	Soft Tissue neck		
☐	Thyroid		
☐	Breast		
☐	Testicular		
☐	Others		

MRI

		W/O	W
☐	Brain		
☐	Brain (Seizure protocol)		
☐	Brain (MS protocol)		
☐	Pituitary/Sella		
☐	Orbits		
☐	Temporal Bone/IAC		
☐	TMJ		
☐	Sinus		
☐	Maxillofacial		
☐	Cervical Spine		
☐	Thoracic Spine		
☐	Lumbar Spine		
☐	Brachial Plexus		
☐	Neck soft tissue		
☐	Chest		
☐	Cardiac		
☐	Breast		
☐	Breast (Implant)		
☐	Abdomen		
☐	Pelvis		
☐	Abdomen & pelvis		
☐	MRCP (Cholangiogram)		
☐	Kidney (Urogram)		
☐	Liver (triple phase)		
☐	Prostate		
☐	Defecography		

	Upper Limb	W/O	W
☐		R	L

☐	Humerus		
☐	Forearm		
☐	Hand		
☐	Shoulder Joint		
☐	Elbow Joint		
☐	Wrist Joint		

	Lower Limb	W/o	W
☐		R	L

☐	Femur		
☐	Lower Leg		
☐	Foot		
☐	Hip Joint		
☐	Knee Joint		
☐	Ankle Joint		

MR ANGIOGRAPHY

		W/O	W
☐	Head/Brain		
☐	Neck/Carotid		
☐	Chest/Aorta		
☐	Abdomen		
☐	Pelvis		
☐	Renal		
☐	Upper Extremity R L		
☐	Lower Extremity R L		
☐	Runoff		

MR Venography

		W/O	W
☐	Head/Brain		
☐	Neck		
☐	Chest		
☐	Abdomen		
☐	Pelvis		
☐	Other		