

9014 S. Yale Ave. Ste . 102
 Tulsa, OK 74137
 PH: 918-499-9200
 FAX: 918-499-9300
 Toll Free: 877-499-6800

"Oklahoma's Most Advanced 3 T Imaging"
Advantage
 DIAGNOSTIC & 3T MRI



APPT DATE:		DIAGNOSIS:	
PT NAME:			
SS#:	SEX: M ___ F ___		
DOB:			
PHONE:			
DRUG ALLERGIES:		PHYSICIAN SIGNATURE:	
COMMENTS:			
		<input type="checkbox"/> STAT	<input type="checkbox"/> SEND CD / FILM W/PT
		<input type="checkbox"/> DLVR CD / FILM & REPORT W/IN 24 HRS	INS. AUTH. NO.
		<input type="checkbox"/> CALL PT TO SCHED DIAGNOSTIC TEST	

MRI	MRI (cont'd)	MRA (cont'd)
Brain w/o Contrast 70551	Upper Extremity w/o Contrast 73218	MRA Upper Extremity 73225
Brain w/wo Contrast 70553	(Specify Area)	(Specify Area)
Orbit/Face/Neck w/o Contrast 70540	Upper Extremity w/wo Contrast 73220	MRA Lower Extremity 73725
(Specify Area)	(Specify Area)	(Specify Area)
Orbit/Face/Neck w/wo Contrast 70543	Upper Extremity Joint w/o Contrast 73221	
(Specify Area)	(Specify Area)	MRI ARTHROGRAM
TMJ w/o Contrast 70336	Upper Extr Joint w/wo Contrast 73223	Shoulder 73222
TMJ w/wo Contrast	(Specify Area)	
	Lower Extremity w/o Contrast 73718	FUNCTIONAL MRI
Cervical Spine w/o Contrast 72141	(Specify Area)	fMRI Brain 70554
Cervical Spine w/wo Contrast 72156	Lower Extremity w/wo Contrast 73720	
Thoracic Spine w/o Contrast 72146	(Specify Area)	Contrast Amount (office use)
Thoracic Spine w/wo Contrast 72157	Lower Extr Joint w/o Contrast 73721	1 ml 66502
Lumbar Spine w/o Contrast 72148	(Specify Area)	10 ml 49402
Lumbar Spine w/wo Contrast 72158	Lower Extr Joint w/wo Contrast 73723	15 ml 49403
	(Specify Area)	20 ml 49404
Abdomen w/o Contrast 74181		50 ml 49405
(Specify Area)	MRA	
Abdomen w/wo Contrast 74183	MRA Brain 70544	OTHER PROCEDURES REQUESTED:
(Specify Area)	MRA Neck w/o Contrast 70547	
	MRA Neck w/wo Contrast 70549	
Pelvis w/o Contrast 72195	MRA Chest 71555	
Pelvis w/wo Contrast 72197	MRA Abdomen 74185	

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