

REPORTING INSTRUCTIONS (REQUIRED):		TODAY'S DATE (REQUIRED):	
FAX REPORT TO: () -		STAT FAX REPORT TO: () -	
PATIENT LAST NAME (REQUIRED)		FIRST	M
DATE OF BIRTH (REQUIRED)			
PATIENT MAIN PHONE (REQUIRED)		ALTERNATE PHONE	
() -		() -	
SEX (REQUIRED)		PREGNANT? (REQUIRED)	
MALE FEMALE		YES NO	
ORDERING CLINICIAN (REQUIRED)		PHONE	
() -		() -	
FAX		CLINICIAN SIGNATURE (REQUIRED-NO STAMPS)	
() -			

CT

Contrast at Radiologist Discretion

IV Contrast

No IV Contrast

Creatinine may be drawn per radiologist's protocol

Head

Spine (Specify Area)

Sinus

Temporal Bone (IAC)

Facial bones

Extremity (Specify)

Neck

Abdomen

Pelvis

Other

Abdomen/Pelvis

Renal Stone Protocol

Urogram

Renal Survey

Enterography

Multiphasic Pancreas

4 Phase Liver

Chest

Chest Inspiration/Expiration

CT Angio

CTA Brain (Circle of Willis)

CTA Carotid

CTA Abdomen/Pelvis (Triple

AAA)

CTA Pulmonary Angio

CTA Chest (Thoracic Aorta)

CTA Renal Angio

Other

CLINICAL TERMS/HISTORY/SYMPTOMS: INCLUDE SPECIFICITY REQUIREMENTS, I.E. LATERALITY, LOCATION, UNDERLYING DISEASE, ETC. THAT SUPPORT ICD-10 CODES (REQUIRED):

ICD-10 CODES THAT SUPPORT CLINICAL TERMS/ HISTORY/SYMPTOMS (REQUIRED):

MRI

Contrast at Radiologist Discretion

No IV Contrast

With & Without IV Contrast

Creatinine may be drawn per radiologist's protocol

Neurologic/Spine

Brain

Brain Perfusion

Brain/IAC

Brain/Seizure

Brain/Pituitary

Brain/Orbit

Brain/Facial Nerve

Soft Tissue Neck

Cervical Spine

Thoracic Spine

Lumbar Spine

Other

Musculoskeletal

Shoulder

RT

LT

Elbow

RT

LT

Wrist

RT

LT

Hand

RT

LT

Knee

RT

LT

Ankle

RT

LT

Pelvis (Bony)

Extremity other

Body

Dynamic Liver

MRCP

Dynamic Liver/MRCP

Dynamic Abdomen (Pancreas)

Dynamic Abdomen (Kidney)

Enterography

Pelvis (Female)

Pelvis (Rectal CA)

Pelvis (Anal Canal Fistula)

Body other

MR Angio

MRA Brain (Circle of Willis)

MRV Brain

MRA Carotid

MRA Renal

MRA Mesenteric

DIGITAL X-RAY

Chest PA/Lat

Chest PA

Ribs

KUB

Skull

Sinus Series

Facial Bones

Abdomen (Flat/Erect)

Other

Extremity

Views

RT

LT

Hand

Finger

Wrist

Forearm

Elbow

Humerus

Shoulder

Knee

Foot

Toes

Ankle

Standing Exam

Yes

No

Tib-Fib

Femur

Hip

Pelvis

Other

Spine

C-Spine (2 V) Flexion/Extension

C-Spine (3 V) AP/LAT

C-Spine (5 V) AP/LAT/Obliques

C-Spine (7) AP/LAT/Obliques

T-Spine (3) AP/LAT

L-Spine (3 V) AP/LAT

L-Spine (5 V) AP/LAT/Obliques

L-Spine (7 V) AP/LAT/Obliques

L-Spine (2) Flexion/Extension

Sacrum (2 V)

Other

ULTRASOUND

Abdomen

Abdomen with Elastography

Liver/Hepatoma Screen

RUQ

Renal

Pelvic

OB

Scrotum

Thyroid

Soft Tissue Lump (Neck)

Extremity Non-Vascular

Carotid

DVT

Other

CT SCAN PREP INSTRUCTIONS – PLEASE HAND THESE INSTRUCTIONS TO THE PATIENT

If you are Diabetic, eat a light breakfast 3 hours prior to your exam.

You may also take your daily medications with a small amount of water.

Non-Diabetic Patients: For four hours before your appointment, please do not eat or drink anything except for the following:

CT Abdomen (Pancreas/Liver/Kidney)

On the day of your exam, begin drinking 1 quart of water 1 hour before your appointment time. You should finish the water just when the exam is scheduled to begin. You do not need to hold your bladder.

CT Abdomen/Pelvis:

On the day of your exam, begin drinking 2 quarts of water 2 hours before your appointment time. You should finish the water just when the exam is scheduled to begin. You do not need to hold your bladder.

CT Renal Colic (KUB):

On the day of your exam, begin drinking 1 quart of water 1 hour before your appointment time. You should finish the water just when the exam is scheduled to begin. Hold bladder last half hour prior to CT scan.

CT Urogram:

On the day of your exam, begin drinking 1 quart of water 1 hour before your appointment time. You should finish the water just when the exam is scheduled to begin. You do not need to hold your bladder.

CT Enterography:

On the day of your exam, do not eat or drink anything 4 hours before your CT appointment time.

Upon arrival you will be asked to drink a special oral contrast that allows us to see the digestive system. Your exam will start approximately 2 hours after you start drinking the oral contrast. Please arrive with any necessary pain/nausea medication as needed.

MRI EXAM PREP INSTRUCTIONS – PLEASE HAND THESE INSTRUCTIONS TO THE PATIENT

If you are Diabetic, eat a light breakfast 3 hours prior to your exam.

You may also take your daily medications with a small amount of water.

Non-Diabetic Patients: For four hours before your appointment, please do not eat or drink anything except for the following:

MRI Dynamic Liver, MRCP, MRI ABD, MRI PELVIS:

On the day of your exam, do not eat or drink anything 4 hours before your appointment time.

MR Enterography:

On the day of your exam, do not eat or drink anything 4 hours before your MRI exam.

Upon arrival you will be asked to drink a special oral contrast that allows us to see the digestive system. Your exam will start approximately 2 hours after you start drinking the oral contrast. Please arrive with any necessary pain/nausea medication as needed.

ULTRASOUND PREP INSTRUCTIONS – PLEASE HAND THESE INSTRUCTIONS TO THE PATIENT

If you are Diabetic, if needed any time prior to your exam, you may have a light snack consisting of clear non-carbonated beverages (such as clear tea, apple juice, or water) and/or regular Jell-O. Please do not eat any butter, dairy or fatty foods.

Ultrasound Abdomen Elastography

Nothing by mouth 8 hours prior and no alcohol 12 hours prior to exam.

Ultrasound of Abdomen

Nothing by mouth 8 hours prior to exam.

Ultrasound Mesenteric Doppler

Nothing by mouth 12 hours prior to exam. Take Mylanta gas tablets or Gas-X two days prior as directed on label.

Ultrasound Renal (Kidney)

MUST drink 32 ounces of water or clear liquid 1 hour prior to exam. Do not empty bladder.

Ultrasound Pelvis/OB with or w/o Transvaginal:

MUST drink 32 ounces of water 1 hour prior to exam. Do not empty bladder.

Ultrasound Liver/Hepatoma

No Prep required

Our Location

DIAGNOSTIC IMAGING

1111 NE 99th Avenue
Portland, OR 97220

Phone: (503) 963-2990

Fax: (503) 963-2982

M–F 7:30AM–5:00PM

From 1-205 North or Southbound

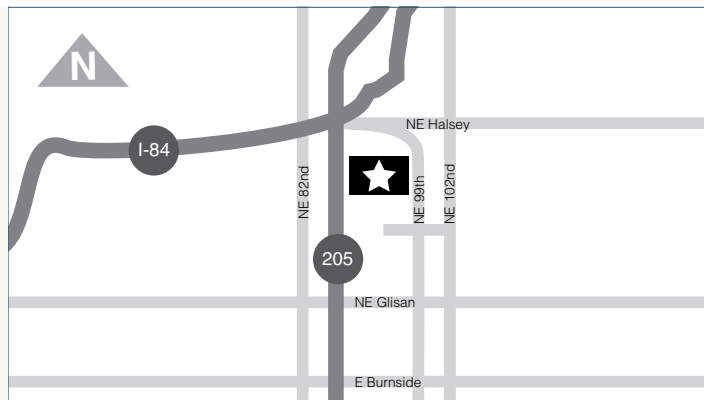
- Take Glisan Street exit
- Head east
- Turn left at 99th

From 1-84 Eastbound

- Take Exit 7
- Turn right just after The Oregon Clinic sign

From 1-84 Westbound

- Take Exit 9 for 205 South to Salem
- From 205 South, take Exit 21A for Glisan Street
- Continue east to 99th Ave
- Head north on 99th Ave to The Oregon Clinic



Notice of Availability

If you speak another language, free language assistance services and appropriate auxiliary aids and services are available to you. Let us know how we can help.

Spanish

Si usted habla español, hay disponibles para usted servicios gratuitos de asistencia de idiomas y dispositivos y servicios auxiliares adecuados. Infórmenos cómo podemos ayudarlo.

Vietnamese

Nếu quý vị nói Tiếng Việt, chúng tôi có sẵn dịch vụ hỗ trợ ngôn ngữ miễn phí cũng như các phương tiện và dịch vụ hỗ trợ phù hợp dành cho quý vị. Xin hãy cho chúng tôi biết cách chúng tôi có thể trợ giúp cho quý vị.

Chinese

如果您说 中文，我们可提供免费的语言帮助，以及适当的辅助援助和服务。请告知我们，您需要什么样的帮助。

Russian

Если вы говорите на русском, мы можем предоставить бесплатно помощь на вашем языке, а также и соответствующие вспомогательные средства и услуги. Сообщите нам, как мы можем помочь.

Korean

한국어 를 구사하시는 경우 무료 언어 지원 서비스와 적절한 보조 도구 및 서비스를 이용할 수 있습니다. 어떻게 도와드릴 수 있는 지 알려주세요.

Ukrainian

Якщо ви розмовляєте цією мовою: українська, то можете отримати безкоштовну допомогу й послуги, зокрема мовні. Повідомте нам, чим ми можемо допомогти.

Japanese

日本語を話される方は、無料の言語支援サービスや適切な補助器具やサービスをご利用いただけます。 私たちがどのようにお手伝いできるかお知らせください。

Arabic

إذا كنت تتحدث [العربية]، فستتوفر لك الخدمات المجانية بشأن المساعدة اللغوية مع المعونات الملائمة والخدمات المساعدة. دعنا نعرف كيف يمكننا مساعدتك.

Romanian

Dacă vorbiți română, serviciile gratuite de asistență lingvistică și ajutoarele auxiliare adecvate sunt disponibile pentru dumneavoastră. Informați-ne cum vă putem fi de ajutor.

Thai

ถ้าคุณพูดภาษาไทย มีบริการช่วยเหลือด้านภาษาฟรี รวมถึงความช่วยเหลือและบริการเสริมที่เหมาะสมแก่คุณ แจ้งให้เราทราบว่าเราสามารถช่วยได้อย่างไร

German

Wenn Sie Deutsch sprechen, stehen Ihnen kostenlose Sprachassistenzen und geeignete Hilfsmittel und Dienstleistungen zur Verfügung. Teilen Sie uns mit, wie wir helfen können.

Persian

اگر به زبان فارسی صحبت می کنید، خدمات رایگان زبانی و وسایل و خدمات کمی مناسب در دسترس شما هستند. به ما اطلاع دهید که چگونه می توانیم کمکتان کنیم.

Somali

Haddii aad ku hadasho Soomaali, adeegyada kaalmada luqadda bilaashka ah iyo kaalmooyinka iyo adeegyada ku habboon ayaa diyaar kuu ah. Nala soo socodsii sida aan u caawin karno.

French

Si vous parlez français, des services d'assistance linguistique gratuits et des aides et services auxiliaires appropriés sont à votre disposition. Dites-nous comment nous pouvons vous aider.

Khmer

ប្រសិនបើអ្នកនិយាយភាសាខ្មែរ សេវាជំនួយភាសាខ្មែរដោយឥតគិតថ្លៃ និងឧបករណ៍ជំនួយនិងសេវាជំនួយសមស្រប មានសម្រាប់អ្នក។ សូមអនុញ្ញាតឱ្យយើងដឹងថា យើងអាចជួយអ្នកបានដោយរបៀបណា។