

To Make Appointment, call:  
**Central Scheduling**

**224.783.8972 (T)**  
**224.783.2823 (F)**

DATE: \_\_\_\_\_

PATIENT NAME: \_\_\_\_\_

BIRTH DATE: \_\_\_\_\_

TELEPHONE #: \_\_\_\_\_

SYMPTOMS / DX: #1 \_\_\_\_\_

#2 \_\_\_\_\_

#3 \_\_\_\_\_

Fax Results: [ ] \_\_\_\_\_

Call Results: [ ] \_\_\_\_\_

PHYSICIAN NAME PRINT OR STAMP: \_\_\_\_\_

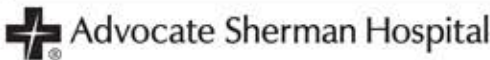
PHYSICIAN SIGNATURE: \_\_\_\_\_

Non-Staff MD NPI: \_\_\_\_\_

Address and Telephone: \_\_\_\_\_

Add'l. Result Copies To: \_\_\_\_\_

X	RADIOLOGY	DESCRIPTION	CPT Code	X	ULTRASOUND	DESCRIPTION	CPT Code	X	LABORATORY	DESCRIPTION	CPT Code
	Abdomen/KUB		74000		Abdominal Aorta		76775		AFP - MS		82105
	Ankle	<input type="checkbox"/> R <input type="checkbox"/> L	73610		Gall Bladder		76705		Basic Metabolic Panel		80048
	Barium Enema / Lower G.I.		74270		Liver		76705		Bilirubin, Direct		82248
	Small Bowel		74250		Pancreas		76705		Bilirubin, Total		82247
	Upper G.I.		74241		Spleen		76705		BUN		84520
	Esophagram		74220		Breast	<input type="checkbox"/> R <input type="checkbox"/> L	76645		CBC w/diff		85025
	Chest PA. & Lateral		71020		Carotid		93880		Cholesterol		82465
	Hip	<input type="checkbox"/> R <input type="checkbox"/> L	73510		Doppler-Arterial	<input type="checkbox"/> Bilat upper <input type="checkbox"/> Bilat lower	93923		Comprehensive Metabolic Panel		80053
	IVP		74410		Arterial Duplex	<input type="checkbox"/> Bilat	93925		Creatinine		82565
	Knee	<input type="checkbox"/> R <input type="checkbox"/> L	73564			<input type="checkbox"/> Rt Unilat <input type="checkbox"/> Lt Unilat	93926		Digoxin		80162
	Shoulder	<input type="checkbox"/> R <input type="checkbox"/> L	73030		Doppler-Venous	<input type="checkbox"/> Bilat upper <input type="checkbox"/> Bilat lower	93970		Electrolyte Panel		80051
	Sinuses		70220			<input type="checkbox"/> Rt upper <input type="checkbox"/> Lt upper	93971		General Health Profile		80050
	Spine Cervical		72052			<input type="checkbox"/> Rt lower <input type="checkbox"/> Lt lower	93971		Glucose, 1 Hour Gestational		82950
	Spine Lumbar		72114		Kidney/Renal		76775		Glucose, Fasting		82947
	Spine Thoracic		72072		Pelvic		76856		Glycated Hgb. (A1C)		83036
	Wrist	<input type="checkbox"/> R <input type="checkbox"/> L	73110		Biophysical Profile		76819		HDL Cholesterol		83718
	M.R.I.				Pregnancy Survey		76805		Hepatic Function Panel		80076
		<input type="checkbox"/> Lab GFR if needed	82565		Pregnancy Lmtd w/AFI		76815		Hepatitis B surf. Ag		87340
	Ankle	<input type="checkbox"/> R <input type="checkbox"/> L w/o cont	73721		Pregnancy F/U		76816		Immunology Screen (HIV)		86703
	Brain	<input type="checkbox"/> w/o cont	70551		Testicles		76870		Iron		83540
		<input type="checkbox"/> w & w/o cont	70553		Thyroid		76536		LDH		83615
	Cervical	<input type="checkbox"/> w/o cont	72141		CT SCAN				Lipid Panel		80061
		<input type="checkbox"/> w & w/o cont	72156		Abdomen Only	<input type="checkbox"/> w/ cont	74160		Ova and Parasite Exam		87177
	Foot	<input type="checkbox"/> R <input type="checkbox"/> L w/o cont	73718			<input type="checkbox"/> w/o cont	74150		Culture, Stool		87081
	Knee	<input type="checkbox"/> R <input type="checkbox"/> L w/o cont	73721			<input type="checkbox"/> w & w/o cont IV	74170		Phenytoin (Dilantin)		80185
	Lumbar	<input type="checkbox"/> w/o cont	72148			<input type="checkbox"/> Lab GFR if needed	82565		Pregnancy, Serum Qual.		84703
		<input type="checkbox"/> w & w/o cont	72158		Abd./Pelvis (if indicated)	<input type="checkbox"/> w/ cont	74177		Pregnancy, Serum Quant.		84702
	Pelvis	<input type="checkbox"/> w/o cont	72195			<input type="checkbox"/> w/o cont	74176		Pregnancy, Urine		81025
		<input type="checkbox"/> w & w/o cont	72197		Brain	<input type="checkbox"/> w/o cont	70450		Prenatal Panel		80055
	Shoulder	<input type="checkbox"/> R <input type="checkbox"/> L w/o cont	73221			<input type="checkbox"/> Lab GFR if needed	82565		Prostate Spec Ag (PSA)		84153
	Thoracic	<input type="checkbox"/> w/o cont	72146			<input type="checkbox"/> w & w/o cont	70470		Prothrombin Time (PT)		85610
		<input type="checkbox"/> w & w/o cont	72157		Cervical Spine	<input type="checkbox"/> w/o cont	72125		PTT		85730
	Wrist	<input type="checkbox"/> R <input type="checkbox"/> L w/o cont	73221		Chest	<input type="checkbox"/> w/ cont	71260		Renal Panel		80069
	NUCLEAR MEDICINE					<input type="checkbox"/> w/o cont	71250		RPR		86592
	Bone Scan		78306			<input type="checkbox"/> Lab GFR if needed	82565		Sedimentation Rate (ESR)		85651
	Bone Three Phase		78315		Chest PE	<input type="checkbox"/> w/ cont	71250		Strep Grp A Culture		87081
	Bone Scan SPECT		78320			<input type="checkbox"/> Lab GFR if needed	82565		T4, Free		84439
	DEXA Bone Density		77080		Lumbar Spine	<input type="checkbox"/> w/o cont	72131		TSH		84443
	Hepatobiliary		78226		Neck (soft tissues)	<input type="checkbox"/> w/ cont	70491		Urinalysis		81003
	Hepatobiliary w/CCK		78227			<input type="checkbox"/> w & w/o cont	70492		Urine Culture		87086
	Lung Scan w/ Chest X-ray		78582/71020			<input type="checkbox"/> Lab GFR if needed	82565		EKG		
	Renal Scan/Renogram		78707		Pelvis Only	<input type="checkbox"/> w/ cont	72193		EKG		93005
	Renogram - Lasix		78708			<input type="checkbox"/> w/o cont	72194		<b>Additional Tests; Instructions:</b> _____		
	Stress Myocardial Perfusion (check one below)		93017/78452			<input type="checkbox"/> Lab GFR if needed	82565		<b>Medical Summary Comments:</b> _____		
	<input type="checkbox"/> Adenosine		J0152		Sinus	<input type="checkbox"/> w/o cont	70486				
	<input type="checkbox"/> Persantine		J1245		Thoracic Spine	<input type="checkbox"/> w/o cont	72128				
	<input type="checkbox"/> Dobutamine		J1250								
	<input type="checkbox"/> Lexiscan		J2785								
	Thyroid Scan and Uptake		78014								



**RADIOLOGY AND LABORATORY  
 PHYSICIAN ORDER FORM**

