



The Radiology Clinic, L.L.C.

Telephone 345-7000 • FAX 345-2494
 208 McFarland Circle, North • Tuscaloosa, AL 35406
 For Appointments: 345-2000 • 800-972-6587
 Scheduling Fax 758-5888

Patient's Name: _____
 Appointment Date: _____ Time: _____
 Reason for Exam: _____
 Allergies: _____
 Referring Physician: _____, M.D.
 Patient may go home after exam. Please call report.
 Return patient to my office after exam. Please FAX report
 Other: _____

TYPE OF EXAM	PATIENT INSTRUCTIONS	REMARKS
GENERAL		
<input type="checkbox"/> Chest X-Ray	No prep	
<input type="checkbox"/> Mammogram Screening	No deodorant or powder	
<input type="checkbox"/> Mammogram Diagnostic	No deodorant or powder	
<input type="checkbox"/> IVP	A laxative the night before & no food/drink after midnight	
<input type="checkbox"/> Other X-Ray		
FLUORO		
<input type="checkbox"/> GI Series <input type="checkbox"/> Small Bowel Series	Nothing to eat or drink after midnight prior to exam	
<input type="checkbox"/> Barium Swallow	No prep	
<input type="checkbox"/> Barium Enema	Pick up prep kit at Radiology Clinic 2 days before exam	
<input type="checkbox"/> Barium Enema with Air Contrast	Pick up prep kit at Radiology Clinic 2 days before exam	
<input type="checkbox"/> Other (inc. arthrogram, myelogram)	Call for Prep if necessary	
ULTRASOUND		
<input type="checkbox"/> Upper Abdomen	Nothing to eat or drink after midnight prior to exam	
<input type="checkbox"/> Pelvis/Pregnancy	Drink 32 ounces of water prior to exam. Do not void	
<input type="checkbox"/> Thyroid <input type="checkbox"/> Breast <input type="checkbox"/> Carotid	No prep	
<input type="checkbox"/> Lower Extremity Venous	No prep	
<input type="checkbox"/> Lower Extremity Arterial	No prep	
CT		
ALERT TECHNOLOGIST TO ALLERGIC HISTORY		
<input type="checkbox"/> Head	Clear liquid diet 4 hours prior to exam	
<input type="checkbox"/> Sinuses <input type="checkbox"/> Intra Trak Sinuses	No prep	
<input type="checkbox"/> Chest	Clear liquid diet 4 hours prior to exam	
<input type="checkbox"/> Upper Abdomen	Pick up oral contrast at Radiology Clinic the day before exam	
<input type="checkbox"/> Lower Abdomen/Pelvis	Pick up oral contrast at Radiology Clinic the day before exam	
<input type="checkbox"/> Pelvis/Boney	No prep	
<input type="checkbox"/> Cervical Spine	No prep	
<input type="checkbox"/> Thoracic Spine <input type="checkbox"/> Lumbar Spine	No prep	
<input type="checkbox"/> Neck Soft Tissue	Clear liquid diet 4 hours prior to exam	
<input type="checkbox"/> Virtual Colonoscopy	Pick up prep kit at Radiology Clinic 2 days before exam	
MRI		
<input type="checkbox"/> Head <input type="checkbox"/> Chest <input type="checkbox"/> Pelvis	No prep	ATTENTION PATIENT PLEASE INFORM THE TECHNOLOGIST IF YOU HAVE A PACEMAKER OR ANY METAL PRESENT IN YOUR BODY OR HAVE HAD OPEN HEART SURGERY.
<input type="checkbox"/> Upper Abdomen <input type="checkbox"/> Cervical Spine	No prep	
<input type="checkbox"/> Thoracic Spine <input type="checkbox"/> Lumbar Spine	No prep	
<input type="checkbox"/> MRA <input type="checkbox"/> Shoulder <input type="checkbox"/> Ankle	No prep	
<input type="checkbox"/> Wrist <input type="checkbox"/> Knee <input type="checkbox"/> Foot <input type="checkbox"/> Breast	No prep	
NUCLEAR MEDICINE		
<input type="checkbox"/> Hida Scan	Nothing to eat or drink after midnight prior to exam / Exam could take 1-4 hours	
<input type="checkbox"/> Bone Scan	Will receive injection and return 2-3 hours later	
<input type="checkbox"/> I-123 Thyroid Scan	Return to The Radiology Clinic 6 hours after dosage	
<input type="checkbox"/> I-123 Thyroid Uptake	Will need to return for scanning 24 hrs after dosing	
<input type="checkbox"/> I-123 Thyroid Scan and Uptake	Return to The Radiology Clinic 6 hours and again 24 hours after dosage.	
<input type="checkbox"/> Gallium Scan	Will receive an injection and return at various times for imaging (usually 24, 48 and 72 hrs post injection)	
<input type="checkbox"/> Gastric Emptying	Nothing to eat after midnight prior to the exam	
<input type="checkbox"/> Liver/Spleen <input type="checkbox"/> Muga Scan	No prep, takes approximately 1 hour	
<input type="checkbox"/> Meckels Scan	Nothing to eat for 4 hours prior to exam	
<input type="checkbox"/> Parathyroid Scan	No prep, imaging takes 1 hour	
<input type="checkbox"/> Renal Scan	Well hydrated, imaging takes 1 hour	
<input type="checkbox"/> Scintimammography	No prep, takes approximately 1 hour	
OTHER		
<input type="checkbox"/> DEXA (Bone Density Study)	No multivitamins or calcium supplements day before & day of exam	
<input type="checkbox"/> Other		