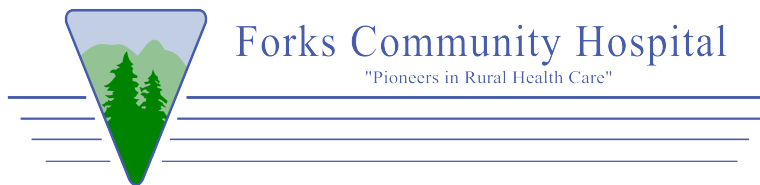


# NUCLEAR MEDICINE ORDER



530 BOGACHIEL WAY  
FORKS, WA 98331  
PHONE (360) 374-6271 X166  
FAX (360) 374-6084

DATE ORDERED:

PATIENT NAME:		DATE OF BIRTH	ORDERING PHYSICIAN
PT PHONE HOME # ALT#	Patient Weight  LBS (MAX WEIGHT 300LBS)	<input type="checkbox"/> Male <input type="checkbox"/> Female	PHYSICIAN PHONE #

INSURANCE CARRIER:	AUTHORIZATION NUMBER:	DATE APPROVED:
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**SKELETAL**

Whole Body Bone Scan(78306)       3-Phase Bone Scan(78315)       Limited Bone Scan(78300)  
 Multiple Images (78305)       SPECT (78320)

Region of Interest: \_\_\_\_\_ (example; rt foot)

**CARDIAC**

Cardiac Stress-Myocardial Perfusion Study w/LEXISCAN (78452)(93015)       MUGA (78472)  
Note: LEXISCAN 0.4mg IVP X 1  
 Reversal: Aminophylline 50-100mg IV, max 250mg, PRN reactive airway

Cardiac Stress-Myocardial Perfusion Study w/TREADMILL (78452)(93015)  
NOTE: Treadmill Stress Test may be converted to Lexiscan by the stressing doctor if patient is unable to perform, complete, or reach target heart rate.

**LIVER/SPLEEN/GALLBLADDER**

HIDA w/Ejection Fraction (78227)       Liver/Spleen Static       Liver (Hemangioma) (78205)  
NOTE: CCK 0.02mcg/kg IV       Liver/Spleen SPECT (78205)       Spleen SPECT (78140) (78185)

**GASTROINTESTINAL**

Gastric Empty (78264)       GI Bleed (78278)       Gastroesophageal Reflux (78262)  
 Meckel's Diverticulum (78290)       Urea Breath Test (78267)

**RESPIRATORY**

Lung VQ (78582)       Lung Perfusion Only (78580)       Lung Differential (78598)

**RENAL**

Renal w/Lasix (78708)       Renal Function (78707)  
 Renal Scarring (78700)       Renal Hypertension (78709)

If procedure needed is not listed, please contact the NM tech for further information: 541-610-2214

HISTORY/DIAGNOSIS/SYMPTOMS (with ICD-9 CODES)	NOTES FOR TECHNOLOGIST
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PHYSICIAN SIGNATURE (OR REPRESENTATIVE):

Verbally Taken  
 Written Order

**PLEASE FAX TO FCH RADIOLOGY (360)374-6084**