

PALATKA



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DEMOGRAPHICS

Form with fields for APPOINTMENT DATE, APPOINTMENT TIME, NAME, EMAIL, D.O.B., REFERRING PHYSICIAN, DATE, SIGNATURE, ICD-10/INDICATIONS/COMMENTS, SEX, STAT, FAX RESULTS, CALL RESULTS, DIRECT LINE#, RADIOLOGIST'S DESCRETION, ONLINE ACCESS TO PATIENT, FORM COMPLETED BY, OFFICE PHONE#, AUTHORIZATION#

MRI/MRA

MRI/MRA CONTRAST options: BRAIN, PITUITARY, IACS, ORBITS, SOFT ISSUE NECK, CERVICAL SPINE, SHOULDER, THORACIC SPINE, ELBOW, LUMBER SPINE, WRIST, DTI, W/O, W/&W/O, HAND, ABDOMEN, HIP, PELVIS, PROSTATE, KNEE, ANKLE, MIDFOOT, FOREFOOT, ARTHROGRAM, MRI/MRA/MRV/OTHER, MRI ENTEROGRAPHY

DIGITAL X-RAY

DIGITAL X-RAY options: SKULL V4, SINUS, ORBITS, FACIAL BONES, MANDIBLE, CERVICAL SPINE, SHOULDER, HUMERUS, CHEST 2V, THORACIC SPINE, RIBS, ABDOMEN COMPLETE, KUB, ELBOW, LUMBER SPINE, FOREARM, AC JOINT, SC JOINT, WRIST, HAND, FINGER, HIP, PELVIS, FEMUR, KNEE, TIBIA/FEBULA, ANKLE, FOOT, TOE, CALCANEUS, SCOLIOSIS, BONE AGE, SKELETAL SURVEY, X-RAY/OTHER

CT/CTA

CT/CTA CONTRAST options: BRAIN, FACIAL BONES, TEMPORAL BONES, ORBITS, SINUS, SOFT TISSUE NECK, CERVICAL SPINE, LUNG SCREENING, CHEST, CALCIUM SCORING, SHOULDER, THORACIC SPINE, ELBOW, LUMBER SPINE, WRIST, HAND, ABDOMEN, W/, W/O, BOTH, HIP, PELVIS, ABDOMEN & PELVIS, IVP/UROGRAM, KNEE, ANKLE, FOOT, CT ENTEROGRAPHY, CT OTHER, CTA BRAIN, CTA CORONARY, CTA CAROTIDS, CTA ABDOMEN, CTA PELVIS, CTARUNOFFS, CTA CHEST PULMONARY EMB., CTA OTHER

ULTRASOUND

ULTRASOUND options: SCREENING, THYROID, CARDIAC ECHO, ABDOMEN COMPLETE, LIVER/GB/PANCREAS (RUQ), KIDNEY/BLADDER, SCROTAL/TESTICULAR, OBSTETRIC (LIST TRIMSTER), PELVIS/TRANSEVINGAL, RENAL ARTERY DOPPLER, CAROTID DOPPLER, VENOUS DOPPLER, ARTERIAL DOPPLER, AORTA DOPPLER, PROSTATE/TRANSRECTAL, UE, LE

MAMMOGRAPHY

MAMMOGRAPHY options: SCREENING MAMMOGRAPHY