



DESERT IMAGING



Physician Portal available
Thank you for your referral

- WEST 122 W Castellano
CENTRAL 7812 Gateway East, Ste. 120
EAST 1727 Lee Trevino OPEN SATURDAYS
THE VEIN CENTER 7812 Gateway East, Ste. 120

PATIENT NAME
DOB
Appt. Date
Appt. Time
Male
Female
Phone #
am
pm

Referring Provider

Provider Signature

Report Preferences: STAT Routine

For STATs: Radiologist to Call: Phone #

Diagnosis

ICD Code Date

SCHEDULING: (915) 577-0100
E-FAX: (877) 777-6809
www.dielp.com

WOMEN'S IMAGING All locations
Breast ultrasound may require doppler evaluation at discretion of findings. This will be performed following a Diagnostic Mammogram, if one is indicated.
Priors, where?
Bone Density and Screening Mammogram
Screening Mammogram
Diagnostic Mammogram
Breast Ultrasound

VEIN CENTER Central & West
Preauthorization may be required
Vein Screening Consult
Vein Mapping Ultrasound
Vein Ablation
Spider Vein Treatment
Treatment follow-up ultrasound

BONE DENSITY All locations
Spine and Hip
Vertebral Fracture Assessment
Wrist
Body Mass Composition (not reimbursed)

BIOPSIES & ASPIRATIONS West
Ultrasound-guided Breast Biopsy
Ultrasound-guided Cyst Aspiration
Ultrasound-guided needle biopsy
Thyroid fine needle aspiration
Other:

CT SCAN Preauthorization may be required - East & Central
CONTRAST: Radiologist's Protocol
Brain, Sinus, Orbits, Face, Temporal Bones, Soft Tissue Neck, Chest, Chest - HRCT, Spine, Abdomen and Pelvis, Liver, CT Urogram, Kidney Mass, Kidney Stone, Adrenals, Pancreas

MRI Preauthorization may be required - East & West
CONTRAST: Radiologist's Protocol
Open, Closed High Field
Brain, Pituitary, IAC, Orbits, Neck Soft Tissue, Cervical Spine, Thoracic Spine, Lumbar Spine, SI Joints, Chest, Abdomen, Pelvis, Shoulder, Elbow, Wrist, Hand, Hip, Soft Tissue Mass (Axillary, MSK)

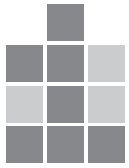
PET/CT Preauthorization may be required - Central
Whole Body, Staging, Brain, Limited, Alzheimer's, Other

DIGITAL X-RAY All locations
Sinus, Skull, Nasal, Chest, Ribs, Scoliosis, Abdomen, Cervical, Thoracic, Lumbar, Sacrum/Coccyx, SI Joints, TMJ, Bone Age, Leg Length, Other:
Shoulder, Clavicle Wts, Humerus, Elbow, Forearm, Wrist, Hand, Hip, Pelvis, Femur, Knee, Tib/Fib, Ankle, Foot, 3V, WB, Tib/Fib, Ankle, Foot, Toes, Finger

ULTRASOUND All locations
Abdomen Complete, Abdomen Wall Mass, OB < 14 weeks, OB > 14 weeks, OB > 30 weeks with S/D ratio, OB BPP Biophysical Profile, OB Limited/Follow up, 3D/4D Baby imaging (NOT COVERED BY INSURANCE), Infant Hips, Aorta, ABI, Arterial Duplex, Venous, Carotids, Liver with doppler, Pelvic Complete (with Transvaginal, unless specified)
Follicular Count, Inguinal Hernia, Penile vessels, Prostate (includes transrectal), Testicular with doppler, Renal (bladder included), Renal with Doppler (bladder included), Bladder (Pre/post Void), Thyroid/Soft Tissue Neck, Nonvascular Extremity:
MSK:
Hysterosonogram
Other:

CARDIOVASCULAR All locations - Except 2D, which is located at Central
EKG, Stress Test (Non nuclear), 2D Echo, Other:

NUCLEAR IMAGING Preauthorization may be required - Central
Total Bone Scan, Limited Bone Scan, 3 Phase Bone Scan (for infection/osteomyelitis, loose hardware), Gastric Emptying Scan, Hepatobiliary Scan, Liver Spleen Scan, MUGA Scan with Ej Fx (resting only), Parathyroid Scan with SPECT (with sono if needed), Renal Scan with Lasix
Thyroid Scan w/Uptake (with sono if needed), Radioiodine Treatment for Hyperthyroidism, Radioiodine Treatment for Cancer, I-131 Post Treatment Scan 5-10 days post Tx, White Blood Cell Scan (WBC) for infection, Myocardial Perfusion Scan with stress test (Nuclear Medicine Stress Test), Other:



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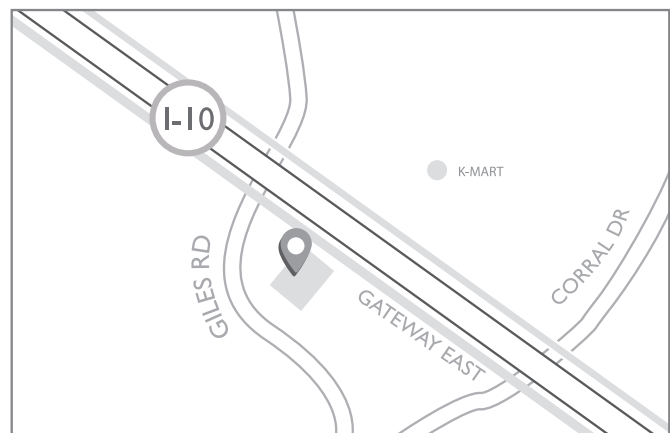
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