McLAREN IMAGING • LAPEER

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GENERAL RADIOLOGY AND CAT SCAN (CT)

Patient Name:	D.O.B.:
Physician:	
Physician Signature:	Date:
Diagnosis:	

General Radiology

ABDOMEN

- ☐ Abdomen, KUB
- ☐ Abdomen, Supin, Erect & or Decub
- ☐ Foreign Body - Child 1V

CHEST

- ☐ Chest PA 1V
- ☐ Chest PA/LAT 2V
- ☐ Chest 4V
- ☐ Ribs Uni-Lat ☐ RT ☐ LT
- ☐ Ribs, Bi-Lat Including PA Chest
- ☐ Sternum

HEAD & NECK

- ☐ Facial Bones
- ☐ Foreign Body Eye
- ☐ Nasal Bones
- ☐ Mandible
- ☐ Orbits
- ☐ Sinuses
- ☐ Skull ☐ 2V ☐ 4V
- ☐ Soft Tissue Neck

SPINE

- ☐ Cervical, AP/Lat
- ☐ Cervical, Complete
- ☐ Lumbar, AP/Lat
- ☐ Lumbar, Complete
- ☐ Thoracic Spine
- ☐ Sacrum/Coccyx
- ☐ Sacro-Illiac JTS
- ☐ Scoliosis Series
- ☐ Spine, Complete

EXTREMITIES

- ☐ AC Joints ☐ RT ☐ LT
- ☐ Ankle, AP/Lat ☐ RT ☐ LT
- ☐ Ankle, Complete ☐ RT ☐ LT
- ☐ Bone Age
- ☐ Clavicle ☐ RT ☐ LT
- ☐ Elbow, AP/Lat ☐ RT ☐ LT
- ☐ Elbow/ Complete ☐ RT ☐ LT
- ☐ Femur ☐ RT ☐ LT
- ☐ Fingers/ Thumb ☐ RT ☐ LT
- ☐ Foot, AP/Lat 2V ☐ RT ☐ LT
- ☐ Foot, Complete 3V ☐ RT ☐ LT
- ☐ Forearm ☐ RT ☐ LT
- ☐ Hand, AP/Lat 2V ☐ RT ☐ LT
- ☐ Hand, Complete 3V ☐ RT ☐ LT
- ☐ Hip (Pelvic Included) ☐ RT ☐ LT
- ☐ Hip, Bi-Lateral ☐ RT ☐ LT
- ☐ Humerus ☐ RT ☐ LT
- ☐ Knee, AP/Lat 1-2V ☐ RT ☐ LT
- ☐ Knee, Complete ☐ RT ☐ LT
- ☐ Lower Ext. Child < 2 yr ☐ RT ☐ LT
- ☐ Oscalsis (Heel) ☐ RT ☐ LT
- ☐ Pelvis
- ☐ Scapula ☐ RT ☐ LT
- ☐ Shoulder 1V ☐ RT ☐ LT
- ☐ Shoulder, Complete ☐ RT ☐ LT
- ☐ Sternoclavicular Joints
- ☐ Tib/Fib ☐ RT ☐ LT
- ☐ Upper Ext. Child < 2 yr ☐ RT ☐ LT
- ☐ Wrist, AP/Lat 2V ☐ RT ☐ LT
- ☐ Wrist, Complete 3V ☐ RT ☐ LT
- ☐ Toe(s) ☐ RT ☐ LT

- ☐ Bone Survey - Adult
- ☐ Bone Survey - Infant

CAT Scan

CTA

- ☐ Abdomen
- ☐ Aorta
- ☐ Aorta W/Runoff
- ☐ Carotid/Neck
- ☐ Chest
- ☐ Extremity
  - ☐ Upper ☐ Lower
  - ☐ RT ☐ LT
- ☐ Head
- ☐ Renal
- ☐ Other _____

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CT

- ☐ Abdomen
- ☐ Abdomen/Pelvis
- ☐ Chest
- ☐ Chest High Resolution
- ☐ Head
- ☐ Pelvis
- ☐ Renal Stone
- ☐ Sinus
- ☐ Soft Tissue Neck
- ☐ Urogram
- ☐ C-Spine
- ☐ T-Spine
- ☐ L-Spine
- ☐ Other _____

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