

McLaren Print System Order

Order No: 73017
 Order Date: 2022-10-17
 User: Sandra Ziaja
 Phone: 13135769330

Ship Location: Harper Professional building Suite 1026 Attn: Sandra Ziaja
 4100 John R Street
 Detroit, 48201

Forms

Quantity: 1000
 Paragon Dept No: 27230
 Dept Name: Imaging PET/CT
 Company Number: 460

Order Total Price: 141.00

Item Number: KCI-101
 Item Description: PET/CT Order Form
 Revision Date: 09/2022
 Print: 1 sided full color
 Paper: 20# White Text
 Size: 8.5 x 11
 Fold:
 Finish: Padded (50 Sheets Per Pad)
 Drill:
 Poster:
 Misc Info: color, ss

PET/CT Order Form
 Phone: 313-576-9622 Fax: 313-576-9620
 email: PETPS@karmanos.org
 NPI: 1336900277 Tax ID: 205448486

Karmanos
 CANCER INSTITUTE
 Wayne State University

Instructions
 Please fax this completed form with clinical information related to this exam to fax number 313-576-9620.
 First oncologic appointment will be given unless otherwise specified.

Patient Demographics
 Name: _____
 Primary Phone: _____ Secondary Phone: _____
 Date of Birth: _____ Sex: _____ Male Female Weight: _____ Height: _____
 Diabetes: Yes No If yes, type of treatment: Insulin Oral Body Size: _____
 Previous Radiation: Yes No If yes, date of last treatment: _____
 Previous Chemotherapy: Yes No If yes, date of last treatment: _____
 Has the patient had a previous PET scan for the same cancer indication? Yes No
 Is the patient desatiphotic? Yes No

Insurance Information
 Primary Insurance: _____
 Secondary Insurance: _____
 Pre-Authorization Required: Yes No
 Pre-Authorization Number: _____
 Diagnosis Code (Required): _____
 Diagnosis: _____

To help determine medical necessity please fax the following documents:
 Most recent MRI
 Most recent progress notes
 Outside Pathology reports
 Outside Pathology reports
 Patient demographics

REASON FOR PET/CT EXAM

ONCOLOGY		GYN/GC	
Standard Body 78803	Prostate PSMA (prostate and Ga-68 7-18	Breast Ceramide F-18 Protonated salt	Cervical, Vaginal, Myometrial Viability Sentinel **Include timing regarding perfusion study
Whole Body 78806 (Bladder, Bladder Symbion or Choline)			
Initial Treatment Strategy			
Subsequent Treatment Strategy			

SMN

18FDC Gallium-68 or Fluoride Tumor Detection 78806 18FDC Tumor Evaluation - Recurrence vs Radiation
 18FDC Gallium-68 for Surgical Evaluation 78808 18FDC Tumor Evaluation - Recurrence vs Radiation
 Sodium 78809

ADDITIONAL CLINICAL HISTORY

ORDERING PHYSICIAN

Physician Signature: _____ Printed Name: _____
 Office Phone: _____ Fax: _____
 Contact Person: _____ Date: _____
 Physicians Address: _____