

# EVERGREEN RADIA IMAGING CENTER

11521 NE 128<sup>th</sup> St., Suite 200  
 Kirkland, WA 98034  
 PH: (425) 952-6100 FAX: (425) 952-6150

## Request for PET/CT imaging

### Patient Information

Patient Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
 Sex:  Male  Female Height: \_\_\_\_\_ Weight: \_\_\_\_\_  
 Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
 Pregnant or Breastfeeding:  Yes  No Claustrophobic:  Yes  No  
 Diabetic:  Yes  No Contrast Allergy:  Yes  No  Unknown

### Insurance Information

Insurance Company: \_\_\_\_\_ Insured Name: \_\_\_\_\_  
 Relationship to Insured:  Self  Spouse  Child  Other \_\_\_\_\_  
 Member ID #: \_\_\_\_\_ Group #: \_\_\_\_\_  
 Authorization #: \_\_\_\_\_

### Clinical Indication/Reason for Exam

Reason for Exam: \_\_\_\_\_  
 Primary Cancer Type: \_\_\_\_\_  
 Diagnosis  Characterization of a Solitary Pulmonary Nodule  
 Staging (pre -treatment)  
 Restaging (post -treatment)  Treatment Monitoring/Assessment  
Re-Staging: Using PET/CT after an entire course of therapy is completed to see if the treatment worked or if there is a persistent disease. Use when trying to identify a recurrence.  
Treatment Assessment: Using PET/CT to scan a patient during a planned course of chemotherapy or radiation therapy to see if the therapy is working and determine if patient should continue therapy.

### Procedure Information

78815 Standard Body (skull base to mid-thigh protocol) with CT  
 78816 Whole Body (head to toe protocol) with CT (ie: Melanoma)  
 78608 Brain Metabolic Evaluation, Alzheimer's, Dementia, Seizure Disorders  
 78816 F18 Bone Scan

### Additional Imaging:

Reason for additional imaging: \_\_\_\_\_  
 MRI: \_\_\_\_\_  
 IV Contrast  Yes  No  PRN Creatinine required within last 30 days if patient has Diabetes, Renal Disease, Age>60  
 CT: \_\_\_\_\_  
 IV Contrast  Yes  No  PRN Creatinine required within last 30 days if patient has Diabetes, Renal Disease, Age>60  
 i -STAT (This is an order to have Radia perform labs at time of exam)  
 Ultrasound: \_\_\_\_\_  
 X -Ray: \_\_\_\_\_

### Physician Information

Referring Physician: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Physician Signature (Required): \_\_\_\_\_ Date (Required): \_\_\_\_\_

**Please include current H&P or chart notes, pathology reports, previous imaging exams performed elsewhere**

## About Evergreen Radia Imaging Center

Radia Inc., P.S., is a full-service radiology physician practice that provides inpatient and outpatient diagnostic imaging services.

At Evergreen Radia Imaging Center, Radia physicians and staff are committed to providing referring providers and their patients the most convenient, safe, high quality imaging services possible. The American College of Radiology (ACR) continuously awards Evergreen Radia Imaging Center physicians and technologists the ACR seal of approval for providing safe and high quality imaging services.

Evergreen Radia Imaging Center provides many same day outpatient exam services. Our technologists and staff are dedicated to providing every patient a warm, comfortable, and friendly environment. The outpatient parking is complimentary and is located right next to the imaging center building. The patients who participate in the Evergreen Radia Imaging Center feedback survey rank their imaging experience with us at 95% or above.

The Evergreen Radia physicians and staff look forward to serving your imaging needs.

### Patient Instructions (If you have any questions, please call us directly at 425-952-6100)

1. No strenuous activity the day before the exam.
2. Nothing to eat 12 hours prior to exam (NOTE: You may drink clear water only).
3. No vitamins on the morning of exam.
4. Please follow the high protein low carbohydrate diet 24 hours prior to date of exam.
5. Please ensure you drink at least 16 ounces of water one hour prior to the procedure.

### Procedure Information

1. The procedure will take about 2 to 3 hours altogether.
2. We strongly suggest avoiding children and pregnant women for up to 10 hours after the PET procedure has been done.
3. If you have any questions or concerns, do not hesitate to call our PET schedulers at 425-952-6100. We are here to help you so please feel free to contact us anytime.

## Map and Directions to Evergreen Radia Imaging Center

### Evergreen Radia Imaging Center

11521 NE 128th St., Suite 200 Kirkland, WA 98034  
 425-952-6100



**From I-405 HEADING NORTH:** Take the 124th Street/Totem Lake Blvd. exit (#20b). Stay to the left for NE 124th Street. Turn left onto 124th Street. Turn right at the light onto 116th Avenue NE. Then turn left at the light onto NE 128th Street. Evergreen Radia Imaging Center will be on your left.

**From I-405 HEADING SOUTH:** Take the NE 124th Street exit (#20). Turn right onto 124th Street. Turn right onto 116th Avenue NE. Turn left at the light onto NE 128th Street. Evergreen Radia Imaging Center will be on your left.

**24 hours cancellation notice requested**