

# Medical Imaging Order Form

*Please use this form when ordering patient diagnostic procedures at the Swedish/Ballard Campus Medical Imaging Department (or, use your own order form). Please fax order prior to the exam.*

Use the following **scheduling** and fax numbers for all **procedures**:

Phone: **206-781-6040** Fax: **206-781-6154**

For **non-scheduling**, contact with various modalities within the department at the phone numbers below:

Radiology: 206-781-6361 (Fax: 781-6199)	<u>Women's Imaging</u>
CT: 206-781-6318	Mammography: 206-781-6349
MRI: 206-781-6363	Bone Density: 206-781-6349
Ultrasound: 206-781-6123	

**Order Date:** \_\_\_\_\_ **Time** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Patient Name:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

**Ordering Physician: Printed Name** \_\_\_\_\_ **Clinic Phone:** \_\_\_\_\_

**Signature** \_\_\_\_\_ **Clinic FAX:** \_\_\_\_\_

**Exam Ordered:**

<b>RIGHT</b>	
UOQ	UIQ
LOQ	LIQ
<b>LEFT</b>	
UIQ	UOQ
LIQ	LOQ

General Diagnostic \_\_\_\_\_

Bone Density (Women's Imaging) \_\_\_\_\_

Fluoro \_\_\_\_\_

CT \_\_\_\_\_

Without Contrast \_\_\_ With Contrast \_\_\_ BUN \_\_\_ Creat \_\_\_ Date \_\_\_\_\_

BUN/Creatinine needed for patients over 60 years old. For all patients with heart disease, diabetes, asthma or kidney failure.

MRI \_\_\_\_\_

Ultrasound \_\_\_\_\_

**Reason For Exam** (symptoms/diagnosis): \_\_\_\_\_

**Allergies:** \_\_\_\_\_ **Pregnant?** Y/N

Instructions for radiologist: Routine \_\_\_ STAT \_\_\_ Call Report \_\_\_ FAX Report \_\_\_

Patient to return with films \_\_\_ Additional reports to: \_\_\_\_\_

# Patient Preparation (Medical Imaging Procedures)

## CT SCAN

**For IV contrast studies, please fax BUN and Creatinine values for all patients over 60 years old. For all patients with history of heart disease, diabetes, asthma or kidney failure, labs should be done within 30 days of test.**

Procedure	Patient Instructions	Procedure	Patient Instructions
<ul style="list-style-type: none"> <li>• CT Head</li> <li>• Sinus Screen</li> <li>• Sinus</li> <li>• CT Spine</li> <li>• CT Thorax/Chest</li> </ul>	<p>No preparation needed.</p> <p>No preparation needed.</p> <p>No preparation needed.</p> <p>No preparation needed. No Barium.</p> <p>Nothing to eat for two hours prior to exam. Can sip clear liquids.</p>	<ul style="list-style-type: none"> <li>• CT Pelvis</li> </ul>	<p>Nothing to eat or drink for four hours prior to exam. No recent Barium studies. Instructions given at time of scheduling. Patients to check with doctor's office about oral contrast.</p>
<ul style="list-style-type: none"> <li>• CT Abdomen</li> </ul>	<p>Nothing to eat for four hours prior to exam. Can sip clear liquids. No recent Barium studies. Instructions given at time of scheduling. Patient to check with doctor's office about need for oral contrast.</p>	<ul style="list-style-type: none"> <li>• CT Extremity</li> <li>• CT Biopsy</li> </ul>	<p>No preparation necessary. Patient preparation instructions and admission times are specific for each case, depending upon the exam ordered and the radiologist performing the procedure.</p>

## DIAGNOSTIC RADIOLOGY

Procedure	Patient Instructions (instructions given to patient when they come in for prep materials)
<ul style="list-style-type: none"> <li>• Upper GI and/or Small Bowel</li> <li>• Barium Enema</li> </ul>	<p>Nothing to eat or drink after midnight the night before exam. No chewing gum or smoking.</p> <p><i>Two days before exam:</i> Non-residue diet, no sugar, no dairy products. May have clear soup, gelatin, liquid non-pulpy, unsweetened juice, sugar-free soda, black coffee or tea without milk or sugar.</p> <p><i>One day before exam:</i> Breakfast, lunch, dinner – continue non-residue diet. Drink 8 oz. of water each hour, from 1 p.m. until 9 p.m. At 5 p.m., add Magnesium Citrate to 8 oz. cold water (use large glass). Stir well, drink after effervescence stops. At 7 p.m., drink 8 oz. water and take four Bisacodyl tablets with water. <b>DO NOT CHEW. NOTHING TO EAT OR DRINK AFTER MIDNIGHT.</b></p> <p><i>Morning of exam:</i> Administer Bisacodyl Suppository two hours prior to appointment.</p>

Exams that do not require *Patient Preparation* include: Barium swallow, chest, abdomen, spine, skull, extremities, tomography and arthrography – for knee (bring shorts). Also, discontinue blood thinner one week prior to arthrography.

## ULTRASOUND

Procedure	Patient Instructions
<ul style="list-style-type: none"> <li>• Abdomen US</li> </ul>	<p>Nothing to eat or drink after midnight the evening before exam or for at least six hours.</p>
<ul style="list-style-type: none"> <li>• Breast/Small Parts</li> <li>• Obstetrical/Pelvis</li> </ul>	<p>No patient preparation needed.</p> <p>One hour before exam, empty bladder. Drink 32 oz. of clear, non-carbonated fluid, and <b>DO NOT</b> urinate.</p>
<ul style="list-style-type: none"> <li>• Kidney (Renal)</li> </ul>	<p>Nothing to eat after midnight the evening before the exam. Drink 10 oz. of water one hour before exam, and do not urinate until after exam.</p>



**MEDICAL IMAGING  
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For a free physician referral:  
1-800-SWEDISH (1-800-793-3474)  
[www.swedish.org](http://www.swedish.org)