



# The Upright MRI



[www.TheNewMRI.com](http://www.TheNewMRI.com)

( ) Hurst, TX

**Fax: 817.577.7501**

**Ph: 817.577.7500**

797 Lonesome Dove Trl, Hurst  
TX 76054

**NPI: 101-309-7062**

Patient Name:	DOB:	( ) Male Height: _____ ( ) Female Weight: _____ (500 Max)
Patient Phone:	Insurance:	ID#

CPT code	MRI:	Right or Left	Contrast	Diagnosis code
70551/3	( ) Brain <i>Additional Scanning to</i> ( ) Pituitary ( ) IAC	-	( ) contrast	
70540/43	( ) Orbits / ( ) Soft Tissue Neck	-	( ) contrast	
72141/56	( ) Cervical Spine <i>add</i> ( ) Flexion ( ) Extension	-	( ) contrast	
72146/57	( ) Thoracic Spine	-	( ) contrast	
72148/58	( ) Lumbar Spine <i>add</i> ( ) Flexion ( ) Extension	-	( ) contrast	
72195/97	( ) Pelvis/Sacrum/Coccyx	-	( ) contrast	
73221/3	( ) Shoulder	( ) R ( ) LT	( ) contrast	
73221/3	( ) Elbow	( ) R ( ) LT	( ) contrast	
73221/3	( ) Wrist	( ) R ( ) LT	( ) contrast	
73218/20	( ) Arm ( ) Humerus ( ) Forearm	( ) R ( ) LT	( ) contrast	
73218/20	( ) Hand	( ) R ( ) LT	( ) contrast	
73721/3	( ) Knee	( ) R ( ) LT	( ) contrast	
73721/3	( ) Hip	( ) R ( ) LT	( ) contrast	
73718/20	( ) Leg ( ) Thigh ( ) Calf	( ) R ( ) LT	( ) contrast	
73718/21	( ) Foot ( ) Forefoot ( ) Ankle	( ) R ( ) LT	( ) contrast	
<u>MRA</u>	( ) MRA Head (Circle of Willis) ( ) MRA Neck (Carotids)	-	No Contrast	
	Other:			

**Please send patient demographics & clinical notes, as available. Also, labs for contrasted scan**

Report will be faxed ~24-48 hours. Images requested? ( ) online Images, ( ) CD with patient, ( ) CD mailed



Dr. Printed Name: \_\_\_\_\_ NPI: \_\_\_\_\_



Completed by: \_\_\_\_\_

**Physician Signature:** \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Notes: \_\_\_\_\_