The Upright MRI

AMERICAN DYNAMIC IMAGING

Online Images available at *App.PromptRad.com*

Please call or email for online image access

MRI Report faxed ~24-48 hours

- **Fax: 210.690.3407**
- Phone: 210.690.3400
- SA@TheNewMRI.com
- 9627 Huebner Rd. #100
  San Antonio, TX 78240
- NPI: 1871676643

Patient Name:	Phone:	Insurance:
Height_____Weight_____Max500lb	DOB: ☐Male ☐Female	ID#:

Please Provide Patient Demographics and Clinical Noes, as available. Also, Creatine labs (GFR) for contrasted scans.

MRI procedure:	*Contrast*	*CPT Code*	*Diagnosis Code*
☐ **Brain** Additional scanning of ☐ Pituitary ☐ IAC	☐With Contrast	70551/ C-53	
☐ **Orbits /** ☐ **Soft Tissue Neck**	☐With Contrast	70540/ C-43	
☐ **Cervical Spine** Add ☐ Flexion ☐ Extension	☐With Contrast	72141/ C-56	
☐ **Thoracic Spine**	☐With Contrast	72146/ C-57	
☐ **Lumbar Spine** Add ☐ Flexion ☐ Extension	☐With Contrast	72148/ C-58	
☐ **Pelvis/SI joint/Sacrum/Coccyx**	☐With Contrast	72195/ C-97	
☐ **Chest/Brachial Plexus**	☐With Contrast	71550/ C-52	
☐ **Shoulder** ☐R ☐L ☐**Elbow** ☐R ☐L ☐**Wrist** ☐R ☐L	☐With Contrast	73221/ C-23	
☐ **Knee** ☐R ☐L ☐**Hip** ☐R ☐L ☐**Ankle** ☐R ☐L	☐With Contrast	73721/ C-23	
☐**Hand** ☐R ☐L ☐**Finger:** _____ ☐R ☐L	☐With Contrast	73218>73221	
☐ **Arm> Humerus** ☐R ☐L **Forearm** ☐R ☐L	☐With Contrast	73218/ C-20	
☐ **Leg> Thigh** ☐R ☐L **Tib/Fib** ☐R ☐L	☐With Contrast	73718/ C-20	
☐ **Foot> Forefoot** ☐R ☐L **Hindfoot** ☐R ☐L	☐With Contrast	73718/ C-20	
☐ **Other :**			
☐ **MRA Head (Circle of Willis)** ☐ **MRA Neck (Carotids)**	No Contrast	70544/70547	

Physician Signature:_____ Completed by: _____

Dr. Printed Name:	NPI:	Dr Ph:	Dr Fax: