

# UNIVERSITY OF VIRGINIA HEALTH SYSTEM DEPARTMENT OF RADIOLOGY/UVA IMAGING ULTRASOUND IMAGING REQUEST FORM

PLACE LABEL HERE

Ordering Date \_\_\_\_\_

SS# \_\_\_\_\_

IF LABEL NOT AVAILABLE, WRITE IN PT NAME & MR#

Please **Fax** to (434) 243-0307-UVA Imaging @ Fontaine or 243-6999-Hosp East

**Schedule** at (434) 243-0321-UVA Imaging @ Fontaine or 243-6888-Hosp East

Patient Name: \_\_\_\_\_ MR# \_\_\_\_\_

Pre/Post-op    Y        N        Date of Surgery \_\_\_\_\_ Date of Test \_\_\_\_\_

DOB \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_        Weight: \_\_\_\_\_

Insurance Company & Plan	Pre Authorization Number	Attending MD/Pic #	Ordering MD/Pic #
Referring Clinic/Office Where Report Should Be Sent	Phone Number of Contact Person Name	Box & Fax Number	

**STUDY DESIRED (Circle Side if appropriate)**

X    Study	X    Study	X    Study
<b><i>Diagnostic</i></b>	<b><i>Vascular</i></b>	<b><i>Interventional Procedures</i></b>
Abdomen RUQ	Liver Doppler (Abd as med nec)	Thoracentesis
Abdomen limited	Renal Artery Stenosis	Paracentesis
Abdomen Complete	(Renal as med necessary)	Biopsy Liver
Aorta	Upper Extremity Venous-Lt	Biopsy Thyroid
Renal (Native)	Upper Extremity Venous-Rt	Biopsy Lung
Renal (Transplant)	Upper Extremity Venous-Bilat	Biopsy Abd Mass
Pelvic Transabd (w/EV as med nec)	Lower Extremity Venous-Lt	
Pelvic Transabdominal	Lower Extremity Venous-Rt	
Pelvic Endovaginal	Lower Extremity Venous-Bilat	
OB < 14 weeks (w/EV as med nec)	TIPS(Abd as med necessary)	
OB < 14 weeks		
OB > 14 weeks		
Thyroid/Parathyroid		

**Other study Not Listed (Specify):**

**Clinical Indications for Exam (Mandatory):**

**ICD-9 Dx Code (Mandatory):**

**Protocol (Internal Use Only):**

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

If films were taken within 2 weeks prior to scan from outside UVA please instruct pt to bring films.

Special considerations:     Non-English speaking     Sz disorder     Pregnancy  
Other: \_\_\_\_\_



Does Exam require early reading?     Yes     No

U  
L  
T  
R  
A  
S  
O  
U  
N  
D  
  
I  
M  
A  
G  
I  
N  
G  
  
R  
E  
Q  
U  
E  
S  
T