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PATIENT NAME _____ DATE ____/____/____ TIME: ____:____

CLINICAL HISTORY:

1.5T MAGNETIC RESONANCE IMAGING

WITH CONTRAST []

- Brain 70553
- Orbits 70543
- IAC 70553
- Facial 70543
- Neck 70543
- TMJ 70336
- Pituitary 70553
- Cervical Spine 72156
- Thoracic Spine 72157
- Lumbar Spine 72158
- Chest 71552
- Abdomen 74183
- MRCP (Biliary) R L B 74183
- Pelvis 72197
- Breast R L B 76093
- Shoulder R L B 73223
- Shoulder Arthrogram R L B 73321/73040
- Hip Arthrogram R L B 73525/73721
- Arm R L B 73220
- Elbow R L B 73223
- Wrist R L B 73223
- Hand R L B 73220
- Hip R L B 73723
- Leg_femur_TIBFIB R L B 73720
- Knee R L B 73723
- Ankle R L B 73723
- Foot R L B 73720
- Prostate 72197
- MR Myelogram 72148
- Other _____

CT 16 MULTIDETECTOR / SPIRAL

WE USE NON-IONIC CONTRAST MEDIA EXCLUSIVELY

WITH CONTRAST []

- Head 70470
- Orbits 70482
- IACS 70482
- Temporal Bones 70482
- Pituitary 70482
- Sinuses 70486
- Sinuses With VTI 70486
- Maxillofacial 70486
- Soft Tissue Neck 70492
- Mandible (Non Dental) 70486
- Abdomen 74170
- Pelvis 72194
- Chest 71270
- Pulmonary Angio 71275
- Shoulder Arthrogram 73040/73200
- Cervical Spine 72127
- Thoracic Spine 72130
- Lumbar Spine 72133
- Leg_femur_TIBFIB R L B 73702
- Foot R L B 73702
- Arm R L B 73202
- Humerus R L B 73202
- Radius/ULNA R L B 73202
- Other _____
- BUN/CR

PET/CT SCANNING

BRING PRIOR MRI AND CT FILM IF DONE AT OTHER FACILITY

WITH DIAGNOSTIC CT SCAN []

- Eyes To Thighs 78815**
- SPN
- NSCLC
- Breast Cancer
- Thyroid Cancer
- Colorectal Cancer
- Esophageal Cancer
- Head & Neck Cancer Specific Diagnosis (Excluding Thyroid And Cns Cancer)
- Ovarian Cancer
- Cervical
- Lymphoma
- Whole Body 78816**
- Melanoma
- Brain 78609**
- Brain Tumor / Perfusion
- Alzheimers / Seizure
- Other _____**
- BUN/CR

MR ANGIOGRAPHY

- Head / Brain 70546
- Neck 70549
- Chest 71555
- Carotid 70549
- Pelvis 72198
- Abdomen 74185
- Lower Extremity 73725

SCREENING STUDIES

WE USE NON-IONIC CONTRAST MEDIA EXCLUSIVELY

- CT Dental Scan Mandible
 - CT Dental Scan Maxilla
 - CT Total Body Scan
 - Coronary Angiography
 - Virtual Colonoscopy
 - Heart + Lung Screening
 - Coronary Calcium (Heart) Screening
 - Pulmonary Nodule (Lung) Screening
- These studies are not covered by insurance*

MAMMOGRAPHY / BREAST IMAGING

BRING PRIOR MRI AND CT FILM IF DONE AT OTHER FACILITY

- Screening Additional studies / views at radiologists' discretion if necessary, check here. 76092
- Diagnostic 76091
- [] Bi-lateral [] Spot Compression
- [] Unilateral [] Implants
- [] Magnification Views
- MRI Breast R L B 76093
- Breast Sono R L B 76645

NUCLEAR MEDICINE

- BONE SCAN**
- Whole Body 78306
- Limited Area 78300
- 3 Phase 78315
- Gallium 78802
- Liver 78215
- Lung Perfusion Only 78580
- Thyroid 1¹²³ 78010
- Parathyroid 78070
- Renal 78707
- Hida 78223

BONE DENSITOMETRY

- DEXA 76075

BIOPSY CT GUIDED / FNA

BRING FILMS IF AVAILABLE

- Breast FNA R L B 10022
- Breast Core R L B 19102
- Breast Mri Biopsy R L B 10022
- Thyroid FNA 76360
- Other _____

ULTRASOUND

- Abdomen 76700
- Pelvis (Transabdominal) 76856
- Transvaginal 76830
- Transvaginal (Before 12 Weeks Gestation) 76817
- Obstetric (Level II) Anatomy 76805
- Obstetric Biophysical Profile 76818
- Breast 76645
- Sonohysterogram 58340/76831
- Thyroid 76536
- Renal 76770
- Scrotum 76870
- Transrectal 76872
- Extremity Non-vascular 76880
- Duplex Carotid 93880
- Venous Extremity (Upper) R L B 93970
- Venous Extremity (Lower) R L B 93971
- Arterial Extremity (Upper) R L B 93930
- Arterial Extremity (Lower) R L B 93925
- Other _____

X-RAY/FLUOROSCOPY

- Chest AP PA/LAT
- Facial Bones Nasal Bones Mandible
- Ribs
- Abdomen Flat Erect
- Thoracic Standing
- Cervical Sp 2 Views 4 Views Standing
- Lumbar Sp 2 Views 4 Views Standing
- Esophagram
- Upper GI Series Small Bowel Series
- GI Series Small Bowel Hysterosalpinogram
- GI Series Esophagram Other _____

Requested by Dr. _____
 Images: Yes No
 Address: _____

Fax Report: Yes No
 Fax Number: _____
 Email Report: Yes No
 Email Address: _____

PRECERT #: _____

PREPARATION FOR DIAGNOSTIC EXAMINATIONS

When making your appointment please inform the office if you are **PREGNANT**. Patients who are elderly, or have diabetes or any condition which prevents them from following a preparation, should consult their physician.

MAGNETIC RESONANCE IMAGING

You **cannot** have a MRI if you have;

1. A CARDIAC PACEMAKER
2. A BRAIN ANEURYSM CLIP MORE THAN 10 YEARS OLD.
3. A MIDDLE EAR PROSTHESIS
4. NEUROSTIMULATORS
5. HAD SURGERY IN THE PAST WEEK.

Please advise the technologist if you have any prosthetic device (ie., hip or knee replacement etc.) If patient requires tranquilizer, please arrive 1/2 hour prior to the appointment, and must be accompanied by a companion. All patients must remove all jewelry, hair pins and other metallic accessories for the procedure. Patients should not wear any eye makeup. Headphones are available during the procedure. You may bring your own CD.

CT SCAN HEAD OR BODY W/ CONTRAST

(We use non-ionic contrast exclusively)

Do not eat, drink or chew anything 3 hours prior to the exam. It is important to advise the technologist, prior to the exam, if you have a history of iodine allergy or anaphylactic reaction.

PET/CT

NEUROLOGIC:

Nothing to eat or drink other than water 4 hours to prior to exam.

CARDIAC:

No caffeinated drinks or medications 24 hours prior to exam. Eat a high carbohydrate meal for breakfast on the day of the exam. (i.e., pancakes, grain cereals, toast, bagels, etc.)

ONCOLOGY:

Nothing to eat or drink other than water for 4 hours prior to exam. Four glasses of water are encouraged and should be consumed in the four hour time period before the exam. No carbohydrates 12-24 hours prior to the exam. No exercise for 36-48 hours prior to exam. Do not chew gum for 24 hours prior to scan.

-Please report to exam location 30 minutes prior to appointment time.

-If you are a **DIABETIC**, please call your physician regarding blood sugar control and diet requirements two day prior to your scheduled exam. Blood sugar level should be less than 200mg/dl.

-If there is a possibility of **PREGNANCY** please inform our staff prior to your exam.

-Valium (diazepam) for claustrophobic or extremely anxious patients (with written approval from your doctor). Someone must accompany the patient after the exam.

-Please expect to be in our office approximately 3-4 hours.

ULTRASOUND

ABDOMINAL

Nothing to eat, drink or chew 6 hours prior to the procedure.

PELVIC

Your bladder must be full for the exam.

1. Two hours before the appointment empty bladder. Do not urinate again until the exam is completed.
2. One hour before the appointment, drink 32 oz of water (4 glasses).
3. See the receptionist if you feel you must urinate prior to the exam.

MAMMOGRAPHY

(please bring prior year's films if available)

Do not wear deodorant, powder or lotion on the breast or underarm area. If available, please bring previous mammogram films with you for comparison. If you are nursing or recently post partum, please advise the office in advance.

DEXA SCAN

Do not take any calcium pills 24 hours prior to the exam.

NUCLEAR THYROID UPTAKE AND SCAN

NOTE: IF YOU ARE PREGNANT OR ACTIVELY NURSING, YOU SHOULD NOT HAVE A NUCLEAR EXAM. PLEASE CONSULT YOUR PHYSICIAN.

1. No salt, no vitamins, no fish or food that contains salt, 48 hours prior to the exam.
2. No iodine contrast studies within 6 months prior to this exam.
3. No thyroid medication for 3 weeks prior to this exam.

NUCLEAR HIDA SCAN

Nothing to eat, drink or chew 6 hours prior to the procedure.

G.I SERIES AND/OR SMALL BOWEL

Nothing to eat, drink or chew 12 hours prior to the procedure.

VIRTUAL COLONOSCOPY/BARIUM ENEMA

Two days before the procedure, follow the direction for the 48-hour preparation in the FLEET BARIUM ENEMA KIT #3. This kit is available in our office at no charge to the patient, or at a pharmacy for a nominal fee.

HYSTEROSALPINGOGRAM:

Call for appointment on the **first** day of menstruation.

DIRECTIONS TO PARK AVENUE RADIOLOGISTS, PC.

Park Avenue Radiologists, PC is located at 525 Park Avenue between 60th and 61st street. Take the 4,5,6,N,R and W trains to 59th Street and Lexington Ave. Walk one block west to Park Avenue. Take F train to 63rd and Lexington Avenue. Walk one block west to Park Ave. and south to 61st. The office is on the east side of Park Ave. There is also a southbound Lexington Avenue bus and Northbound Madison Avenue bus. Parking garages are located on 60th St.. Between Lexington and Park Avenues and on 61st. between Park and Madison Avenues.