Overlook Medical Park 6 Tsienneto Road, Suite LL100 Derry, NH 03038 Castle Commons, Suite 103 49 Range Road Windham, NH 03087

603.537.1363 • www.DerryImaging.com

Please bring this form and your insurance card(s) with you. Plan to *arrive 10 minutes prior* to any scheduled diagnostic exams. *If you arrive 15 minutes past your scheduled appointment, it may be necessary to reschedule your exam.*

Fax Order to (603) 537-1324 No appointments necessary for x-ray.

DOB:
Primary Care Physician:

ABDOMEN	CHEST/THORAX	LOWER EXTREMITY	ULTRASOUND
1 view / KUB	Chest PA & Lat	Ankle R L	Upper Abdomen
Flat & Upright	Chest 1 view	Femur R L	Aorta
	Chest with apical lordotic	Foot R L	Breast – uni or bilateral
	Bilat Ribs/PA CXR	Heel R L	Carotid
SPINES	Uni Ribs/PA CXR R L	Knee R L	Extremity/non-vascular
Lumbar Spine	Infant – Abuse	-AP Standing Knee	-Upper Extremity R L
Cervical Spine	Scapula R L	-Knee with Sunrise (4v)	-Lower Extremity R L
2v c-spine/Pedi	Skeletal Series	Lower Leg R L	Hysterosonography
Lumbar with oblique's	Sternum	Toe R L	OB Biophysical
Sacrum/coccyx	SC Joints	Infant Hip to Ankle	OB – 1 st Trimester <13 wks
SI Joints			OB - Complete >13 weeks
Thoracic Spine			OB – Repeat FU
		UPPER EXTREMITY	OB Multi-gestational
	HEAD & NECK	PA Hands Arthritis	Pelvic/Gyn
PELVIS	Facial Bones	AP Feet Arthritis	Endo-Vag/OB
Pelvis – AP only	Mandible	AC Joints - Bilateral	Endo-Vag/Gyn
Pelvis 1hip R L	Nasal Bones	Bone Age – PA hands	Renal
Pelvis & Bil Hips	Orbits	Clavicle R L	Testicular
	Sinuses	Elbow R L	Thyroid
	Water's (sinus) 1 view	Finger R L	Venous
3D MAMMO	Skull (CT Advised)	Forearm R L	-Upper Extremity R L
Routine Mammo	Soft Tissue Neck/Adenoids	Hand R L	-Lower Extremity R L
Diagnostic Mammo	TMJ's (MRI Advised)	Humerus R L	
-Left -Right -Bilateral		Shoulder R L	
		Wrist R L	CARDIOLOGY
Implants Y N		Infant Shoulder to Wrist	Holter Monitor
Last Mammo			Echocardiogram
BONE DENSITOMETRY			Stress Echo
Dexa			Stress Test
			(treadmill max - 350 lbs)
			OTHER
			OTTLK
	1	†	

Patient may leave after exam.

Patient should return to physician's office.

See prep instructions on back of this form.