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- The location of your exam is: Cascade Medical Imaging, LLC - Eastside 1460 NE Medical Center Dr., Bend, Oregon Cascade Medical Imaging, LLC - Westside 1693 SW Chandler Ave., Bend, Oregon

- Cascade Medical Imaging, LLC - SCMC Bend 2500 NE Neff Rd., Bend, Oregon Cascade Medical Imaging, LLC - SCMC Redmond 1253 N. Canal Blvd., Redmond, Oregon

Patient Name \_\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_ Referring Physician \_\_\_\_\_

Appointment Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Appointment Time \_\_\_\_\_ am / pm (circle one) Patient has return visit on \_\_\_\_/\_\_\_\_/\_\_\_\_

Clinical Hx / Note to Radiologist / Tech: \_\_\_\_\_

Physician's Signature (required) X

(PLEASE MARK EXAM(S) & EXAM TYPES) CT (PLEASE MARK EXAM(S) & EXAM TYPES)

BRAIN OR HEAD COMPLETE P. FOSSA TEMP. BONE ORBIT Without IV Contrast Without & With IV Contrast With IV Contrast MAXILLOFACIAL Without IV Contrast With IV Contrast Without & With IV Contrast NASAL SINUSES Limited Complete, Axial & Coronal SOFT TISSUE NECK With IV Contrast Without & With IV Contrast CHEST - THORAX With IV Contrast Without & With IV Contrast Without IV Contrast High Resolution Heart Calcium Scoring Pulmonary Embolus Screening for Pulmonary Nodule Limited Other:

CERVICAL SPINE LEVELS OF INTEREST: Without IV Contrast With Myelogram With IV Contrast Stealth THORACIC SPINE LEVELS OF INTEREST: Without IV Contrast With Myelogram With IV Contrast Stealth LUMBAR SPINE LEVELS OF INTEREST: Without IV Contrast With Myelogram With IV Contrast Stealth CT. ANGIOGRAPHY Angio Abdomen (AAA, SMA, Renal, etc) Angio Aorta & Runoff Angio Chest (TAA) Angio Head (Circle Of Willis etc) Angio Neck (Carotid) Angio Pelvis Angio Lower Extremity Angio Upper Extremity

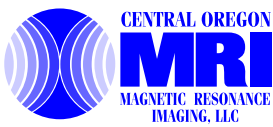
ABDOMEN - PELVIC AREAS UPPER ABDOMEN (Diaphragm to Iliac Crest) ABDOMEN & PELVIC ABDOMEN ONLY With IV Contrast Without & With IV Contrast Without IV Contrast TRI Phase Liver CT Colonography (Entire Colon) CT Enterography CT Urinary Tract (Kidneys Through Bladder) CT Appendix PELVIC (Iliac Crest through Symphysis) PELVIC & ABDOMEN PELVIC ONLY With IV Contrast Without & With IV Contrast Without IV Contrast With Pubic Arch Study UPPER EXTREMITY Without IV Contrast With IV Contrast 3D Reconstructions Joint Injected (Post Arthrogram): LOWER EXTREMITY Without IV Contrast With IV Contrast 3D Reconstructions Joint Injected (Post Arthrogram):

(PLEASE MARK EXAM(S) & EXAM TYPES) MRI / MRA (PLEASE MARK EXAM(S) & EXAM TYPES)

BRAIN OR HEAD P. FOSSA IAC ORBIT FACIAL NERVES Contrast / Radiologist Discretion TMJ Without Contrast Without & With Contrast Spectroscopy Stealth Protocol Brain With Head / Neck Angio (stroke protocol) Angio Head Only Angio Neck Only SOFT TISSUE NECK Contrast / Radiologist Discretion Without Contrast Without & With Contrast SPINE CERVICAL THORACIC LUMBAR Contrast / Radiologist Discretion Without Contrast Without & With Contrast BREAST Silicone Implant Rupture Breast Bilat Without & With

M.S. WORKUP Brain - Cervical - Thoracic (Complete With Contrast) Brain - Cervical - Thoracic (Complete Without Contrast) Limited to: BRACHIAL PLEXUS RT LT Without Contrast Without & With Contrast UPPER EXTREMITY SHOULDER ELBOW WRIST RT LT BILATERAL Contrast / Radiologist Discretion Include Joint Injection Under Fluoroscopy Soft Tissue: LOWER EXTREMITY HIP KNEE ANKLE FOOT RT LT BILATERAL Contrast / Radiologist Discretion Include Joint Injection Under Fluoroscopy Soft Tissue: ANGIO - MISCELLANEOUS Angio - Arch / Carotids With Contrast Angio - Chest Without and With Contrast Angio - Abdomen With Renal Arteries Angio - Abdomen With Runoffs Other:

ABDOMEN - PELVIC AREAS Without Contrast Without & With Contrast MRCP PELVIS PROSTATE UTERUS LUMBOSACRAL PLEXUS Contrast / Radiologist Discretion Without Contrast Without & With Contrast CHEST MEDIASTINUM Contrast / Radiologist Discretion Without Contrast Without & With Contrast CARDIAC Cardiac Without Contrast Cardiac Without & With Contrast Cardiac Viability



Scheduling (541) 382-9383

Mainline (541) 382-6633

The location of your exam is:

- Checkboxes for exam locations: Cascade Medical Imaging, LLC - Eastside, Cascade Medical Imaging, LLC - Westside, Cascade Medical Imaging, LLC - SCMC Bend, Cascade Medical Imaging, LLC - SCMC Redmond

Patient Name \_\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_ Referring Physician \_\_\_\_\_

Appointment Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Appointment Time \_\_\_\_\_ am / pm (circle one) Patient has return visit on \_\_\_\_/\_\_\_\_/\_\_\_\_

PATIENT - If your doctor's office has given you x-rays, please bring them with you to your appointment! See location map on back

REFERRING OFFICE - Please check the appropriate exam prep for your patient.

MRI SCANS - IMPORTANT INFORMATION

There is no preparation for most MRI scans unless you are claustrophobic, in which case you need to arrange for someone to drive you home after your scan.

You will be asked to thoroughly complete our MRI pre screening form and change into a gown before entering the exam room.

It is important to remember that every patient and exam is different. Consequently some scans will take longer or be more involved than others.

CT SCANS - IMPORTANT INFORMATION

After you enter the scan room the radiographer will position you on a special table. The area to be scanned will be moved into the ring, which contains an x-ray tube and computer receptors.

Frequently it is necessary to use an IV medication called contrast to highlight certain structures. This medicine will be given through a vein in your arm.

It is important to remember that every patient and exam is different. Consequently some scans will take longer or be more involved than others.

CT SCAN of the SINUS, EXTREMITY, HEART or CT URINARY TRACT

- 1. There is no preparation for these exams.
2. Allow approximately 40 minutes for your exam.

CT SCAN of the HEAD, CHEST or NECK; HEAD or CHEST WITHOUT CONTRAST ONLY - NO PREP

- 1. Nothing to eat or drink for 4 hours prior to your exam.
2. You may take your normal medicines with the exception of Glucophage (metformin) or Glucovance.
3. If you take Glucophage or Glucovance or are allergic to radiologic contrast media, call our office at least the day before your exam for special instructions.
4. Allow approximately 1 hour for your scan.

CT ANGIO

- 1. Nothing to eat or drink for 4 hours prior to your exam.
2. You may take your normal medicines with the exception of Glucophage (metformin) or Glucovance.
3. If you take Glucophage or Glucovance or are allergic to radiologic contrast media, call our office at least the day before your exam for special instructions
4. For a CT angio of your abdominal aorta - drink 1 gallon of water two hours before your appointment time.
5. Allow approximately 1 hour for your scan.

CT COLONOGRAPHY

- 1. Pick-up a Prep Kit from CORA.
2. Follow the TWO DAY prep instructions found inside the box.
3. Allow approximately 1 hour for your scan.

CT SPINE

- 1. There is no preparation for a routine spine CT.
2. Allow approximately 1 hour for a routine spine scan.
3. If you are scheduled for a myelogram with a CT to follow - ask your physician for a special instruction sheet. You may also pick this sheet up at our office.

CT SCAN of the ABDOMEN and/or PELVIS

- 1. Pick up 3 oral Hypaque doses at Central Oregon Radiology.
2. Mix any one of the syringes of Hypaque with 12 ounces of clear juice (any type without pulp such as cranberry or apple) and drink at 8:00 pm THE EVENING BEFORE your appointment.
3. Mix another syringe of Hypaque with 12 ounces of juice and drink 2 HOURS PRIOR to your exam time.
4. Mix the last syringe of Hypaque with 12 ounces of juice and drink 1 HOUR PRIOR to your exam time.
5. Do not eat or drink anything else for 4 hours prior to your exam with the exception of medications already prescribed by your physician.
6. If you are diabetic continue your usual diet along with the Hypaque at the appropriate times. DIABETIC PATIENTS TAKING GLUCOPHAGE (metformin) or GLUCOVANCE - contact our office for special instructions about taking your medication.
7. If you have previously had a reaction to x-ray contrast call our office prior to your appointment time.
8. Inform the radiographer if you have asthma, diabetes, heart or renal problems or could possibly be pregnant.
9. You may experience some diarrhea with this oral prep.
10. Allow approximately 1 hour for your scan.

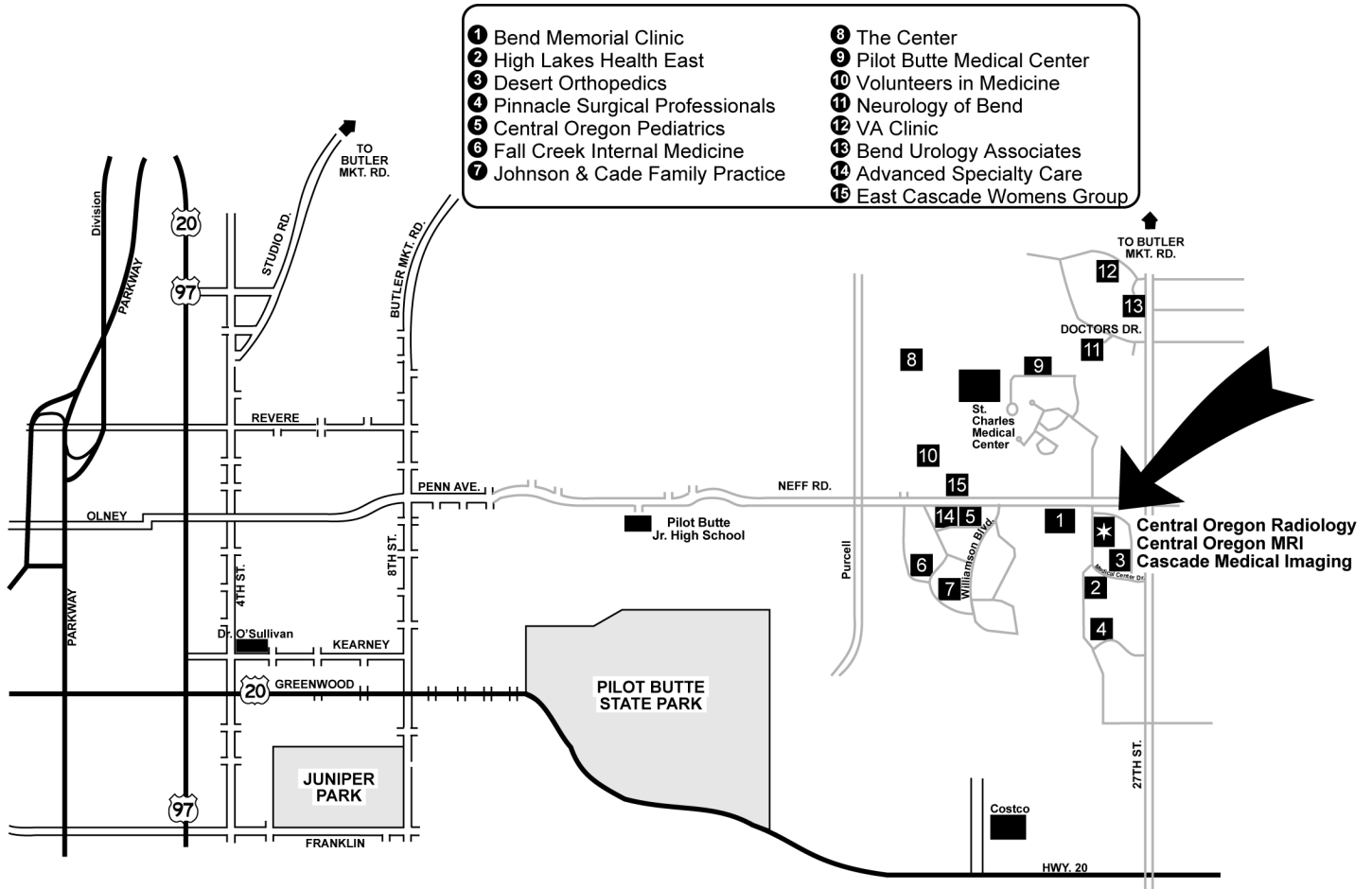
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Thomas F. Koehler, M.D.
Steven J. Michel, M.D.

# BEND LOCATION



# REDMOND LOCATION

