



15857 Pomona Rincon Road, Chino Hills, CA 91709

Phone: 909.591.5587 Fax: 909.591.0538

spectrummri@gmail.com

PATIENT'S NAME

D.O.B.

PHONE

Office Use Only: Administrative: Spectrum MRI Imaging Center

REFERRING PHYSICIAN _____ SIGNATURE _____

PHONE _____ FAX _____

CLINICAL DIAGNOSIS _____

LAW OFFICE _____ ☐ PI ☐ CASH ☐ PRIVATE INSURANCE

PRIVATE INSURANCE PATIENTS: Please Fax or Email Physician's Referral Form and the Front/Back of Insurance Card to 909.591.0538 or spectrummri@gmail.com

FUNCTIONAL BRAIN STUDIES

- ☐ NEUROQUANT / VOLUMETRIC ANALYSIS
- ☐ DTI (DIFFUSION TENSOR IMAGING)
NEUROFIBER TRACTOGRAPHY (Name) _____
- ☐ SPECTROSCOPY
- ☐ FUNCTIONAL STUDIES _____

DTI OF SPINE (SPECIFY LEVELS)

- ☐ CERVICAL SPINE _____

MRI's CONTRAST ☐ YES ☐ NO

- ☐ ABDOMEN
- ☐ ANGIOGRAPHY-CAROTIDS, CIRCLE OF WILLIS
- ☐ BRAIN
- ☐ BREAST (IMPLANTS OR CANCER)
- ☐ CERVICAL SPINE
- ☐ CHEST
- ☐ IAC
- ☐ LUMBAR-SACRAL SPINE
- ☐ MRA-CONTRAST ENHANCE
- ☐ MRCP
- ☐ MR VENOGRAM
- ☐ NASOPHARYNX
- ☐ PELVIS
- ☐ PERIPHERAL ANGIOGRAPHY
- ☐ PITUITARY
- ☐ PROSTATE
- ☐ RIBS
- ☐ SOFT TISSUE NECK
- ☐ THORACIC SPINE
- ☐ UPPER OR LOWER EXTREMITY _____

ARTHROGRAMS ☐ YES ☐ NO

- ☐ KNEE ☐ LEFT ☐ RIGHT
- ☐ ELBOW ☐ LEFT ☐ RIGHT
- ☐ ANKLE ☐ LEFT ☐ RIGHT
- ☐ SHOULDER ☐ LEFT ☐ RIGHT
- ☐ WRIST ☐ LEFT ☐ RIGHT
- ☐ HIPS ☐ LEFT ☐ RIGHT

ULTRASOUND

- ☐ ABDOMEN-GENERAL
- ☐ BREAST LEFT, RIGHT, OR BOTH _____
- ☐ CAROTID DUPLEX
- ☐ ECHOCARDIOGRAM
- ☐ GALLBLADDER
- ☐ KIDNEY
- ☐ OB
- ☐ PELVIC
- ☐ PROSTATE
- ☐ TESTICLES
- ☐ THYROID
- ☐ TRANS-RECTAL
- ☐ VASCULAR ARTERIAL
- ☐ VASCULAR VENOUS

DENTAL

- ☐ MAXILLA
- ☐ MANDIBLE
- ☐ TMJ's
- ☐ 3D CT OF MAXILLOFACIAL

COMMENTS _____

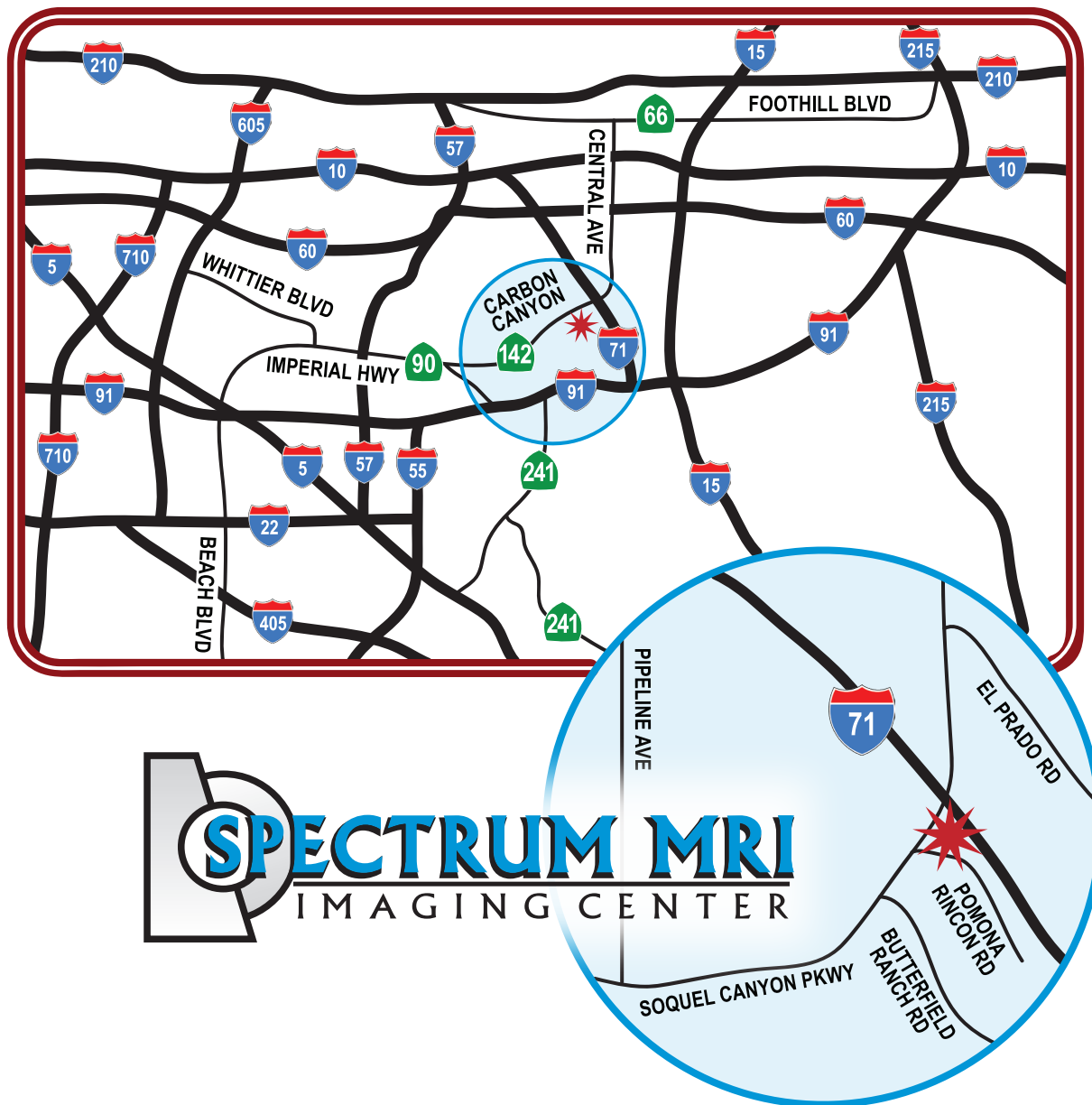
Please remove all metallic items including earrings, jewelry, watches, moneyclips, hairclips, etc.

If you have a pacemaker, intracranial aneurysm clips, transcutaneous nerve stimulators or metal fragments in your body, please call our office to verify if your device is MRI compatible.

You may eat and drink as usual on the day of the exam.

Wear comfortable, loose fitting clothing (e.g.a. jogging suit).

Please bring your insurance card with you.



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