



Location Preference: [] 8522 W. Capitol Drive, Milwaukee, WI 53222 phone 414.847.1800 fax 414.847.1820 [] 10500 W. Loomis Rd., Suite 120 Franklin, WI 53132 phone 414.529.3100 fax 414.529.3102

Please fax copy of insurance card with order.

Patient Name: LAST FIRST MIDDLE INITIAL Date of Birth: ___/___/___ [] Male [] Female

Address: STREET CITY STATE ZIP CODE

Phone Numbers: Home Cell

Diagnosis/Reason for Exam (Please avoid "rule out" terminology):

ORDERS

RADIOGRAPHY/X-RAY of: [] Right [] Left

Special views?

FLUOROSCOPY: [] UGI [] Small Bowel [] Colon [] VCUG [] Esophagram

Other or Special Request

ULTRASOUND: [] Renal [] Infant Hips [] Head [] Abdomen [] Pylorus

Other or Special Request

MRI: [] Head/Brain [] C spine [] T spine [] L-S spine [] Extremity [] Right [] Left [] Soft Tissue Neck [] Chest [] Abdomen [] Pelvis [] Other [] Contrast [] No Contrast [] Radiologist's Discretion

CT: [] Head [] Neck [] Chest [] Abdomen & Pelvis [] Sinus

Other or Special Request

[] Contrast [] No Contrast [] Radiologist's Discretion

If patient is >50 years of age, is Diabetic, or has Kidney Disease: [] Creatinine or Recent Result

[] 3D [] Coronal [] Sagittal [] Radiologist's Discretion

INTERVENTIONAL: [] PICC [] Tube Placement TYPE [] Arthrogram SITE

[] LP SEND FOR [] Aspiration/Biopsy SITE

OTHER CLINICAL INFORMATION

[] Allergies or Other Risk Factors? [] NKA

[] This Patient will Likely Need Sedation [] Known Claustrophobia (MRI)

[] Negative Pregnancy Test; Date [] Not Applicable

SPECIAL REQUESTS

[] Call Results to [] Fax Results to

[] Send CD with Patient [] Send Films with Patient [] Send Paper Copy with Key Images

[] Mail CD with Report [] Compare to Exam Performed at Date

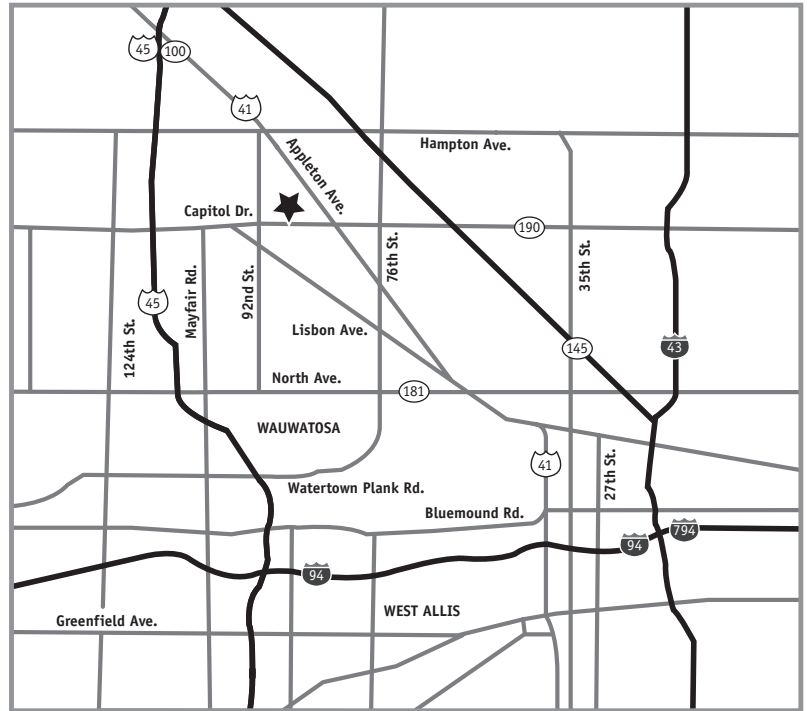
PHYSICIAN'S SIGNATURE (REQUIRED)

PLEASE PRINT NAME

DATE

pdi 
Pediatric Diagnostic Imaging
 Dr. Robert Wells & Associates S.C.

LOCATION 8522 W. Capitol Drive,
 Milwaukee, WI 53222
 PHONE (414) 847-1800
 FAX (414) 847-1820
 WEB SITE www.pdi-imaging.com
 PARKING Convenient parking on Capitol
 Drive, 86th Street or in rear
 of building (enter via alley).



LOCATION OneSource Medical Center
 10500 W. Loomis Rd., Suite 120
 Franklin, WI 53132
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