



2715 Legends Parkway • Prattville, AL 36066
 Phone (334) 676-4520 • Fax (334) 676-4521

Appointment Date: _____

Patient Home Phone: _____

Arrival Time: _____

Patient Work Phone: _____

Exam Time: _____

Patient Cell Phone: _____

Stat Report Call Report / # _____ Send images w/patient

Patient Name: _____ DOB: _____ M F

Ins: (type/policy #): _____ Pre-cert. #: _____

Clinical History/Indication/ICD10 _____

Referring Physician (Print) _____ Physician Signature _____

Creatinine: _____ **Date Col.:** _____

MRI			
<input type="checkbox"/> Brain	<input type="checkbox"/> with contrast	<input type="checkbox"/> without contrast	
<input type="checkbox"/> IAC's	<input type="checkbox"/> with contrast	<input type="checkbox"/> without contrast	
<input type="checkbox"/> Pituitary	<input type="checkbox"/> with contrast	<input type="checkbox"/> without contrast	
<input type="checkbox"/> Orbits	<input type="checkbox"/> with contrast	<input type="checkbox"/> without contrast	
<input type="checkbox"/> Cervical Spine	<input type="checkbox"/> with contrast	<input type="checkbox"/> without contrast	
<input type="checkbox"/> Thoracic Spine	<input type="checkbox"/> with contrast	<input type="checkbox"/> without contrast	
<input type="checkbox"/> Lumbar Spine	<input type="checkbox"/> with contrast	<input type="checkbox"/> without contrast	
<input type="checkbox"/> Shoulder R / L	<input type="checkbox"/> with contrast	<input type="checkbox"/> without contrast	
<input type="checkbox"/> with Arthrogram			
<input type="checkbox"/> Hip	R / L	<input type="checkbox"/> with contrast	<input type="checkbox"/> without contrast
<input type="checkbox"/> Knee	R / L	<input type="checkbox"/> with contrast	<input type="checkbox"/> without contrast
<input type="checkbox"/> Ankle	R / L	<input type="checkbox"/> with contrast	<input type="checkbox"/> without contrast
<input type="checkbox"/> Foot	R / L	<input type="checkbox"/> with contrast	<input type="checkbox"/> without contrast
<input type="checkbox"/> Wrist	R / L	<input type="checkbox"/> with contrast	<input type="checkbox"/> without contrast
<input type="checkbox"/> Pelvis		<input type="checkbox"/> with contrast	<input type="checkbox"/> without contrast
<input type="checkbox"/> Liver		<input type="checkbox"/> with contrast	<input type="checkbox"/> without contrast
<input type="checkbox"/> MRCP		<input type="checkbox"/> with contrast	<input type="checkbox"/> without contrast
<input type="checkbox"/> Other	_____		

MRA			
<input type="checkbox"/> Head	<input type="checkbox"/> with contrast	<input type="checkbox"/> without contrast	
<input type="checkbox"/> Carotids	<input type="checkbox"/> with contrast	<input type="checkbox"/> without contrast	

Preparing for your MRI exam

Preparing for your MRI exam is easy. Follow your normal daily routine and continue any prescribed medication unless your doctor or our office has instructed you otherwise.

Please arrive 15 minutes early for your scheduled appointment, and bring all Medicare, insurance, or health plan documents, subscriber numbers, etc.

Metal and your MRI exam

Please do not wear any metal such as jewelry or hairpins during your MRI exam. Metal worn in the magnet area will disturb the radio signals that allow the computer to create images of your body. Some heavy eye shadows and hair sprays will also interfere with the quality of your scan.

Please dress comfortably.

Please do not wear any clothing with metal or zippers.

Be sure to tell the technologist if any of the following applies to you:

- Have a pacemaker
- Metal fragments are in your body (surgical staples, cochlear implants, dental bridges, metal aneurysm clips, shrapnel, hearing aids, or other metal implants)
- Think you may be pregnant

Sonos Imaging is located in front of Home Depot
at 2715 Legends Parkway, Prattville AL

