

P.E.T. / CT ORDER FORM

TENNESSEEOncology

a partner of  OneOncology

Tennessee PET Scan Center

Phone: 615.890.5858
Fax: 615.890.5670

Imaging Alliance-Nashville PET

Phone: 615.354.1255
Fax: 615.354.9806

Tennessee Oncology PET Services

Phone: 615.320.7387
Fax: 615.327.3756

Lebanon PET Scan Center

Phone: 615.453.7374
Fax: 615.444.0492

CENTRAL SCHEDULING: 615.329.1599

Appt. Date: _____ Drink/Arrival Time: _____ Appt. Time: _____

Auth # _____

PET ORDER

STAT REPORT

Standard Body Scan

Standard Whole Body Scan (Skull base to mid thigh, CPT 78815)

Special Non-Standard Body Scan

Melanoma Whole Body Scan (for Initial Staging Melanoma, CPT 78816)

Brain Only, CPT 78608

CT ORDER

STAT REPORT

(IV CONTRAST WILL BE GIVEN WHERE APPROPRIATE UNLESS SPECIFIED OTHERWISE)

- Chest
- Abdomen (diaphragm to iliac crest)
- Pelvis (iliac crest to pubis)
- Orbits
- Other, specify _____

- Head
- Neck
- Sinus
- Extremity, specify _____

PATIENT DEMOGRAPHICS

Patient Name: _____ Date of Birth: _____

Home Phone: _____ Work Phone: _____ Cell: _____

Social Security No: _____ Emergency Contact Name: _____ Emergency Phone: _____

Referring Physician: _____ Signature: _____
(Print Name) **(NO STAMPS PLEASE)**

Phone: _____ Fax: _____

CLINICAL INFORMATION

ICD-10 Code: _____ **UNSPECIFIED CODES CAN NOT BE ACCEPTED**

Primary Diagnosis: _____

ICD-10 Code: _____ **UNSPECIFIED CODES CAN NOT BE ACCEPTED**

Secondary Diagnosis: _____

IV Contrast Allergy: _____ Yes _____ No _____ Unknown

Location of Previous Scans: _____