

Restorative Imaging Institute

4901 W 136th Street Overland Park, KS 66224

Phone: 913-890-7280 Fmail: info@rii-kc.com

Patient	Name:		Linait. Info	/111-K	5.0011	
Date of	Birth:					
Patient Contact Number:		MRI M	usculoskeletal Laterali	Laterality L/R		
Orderir	ng Physician:		73221 Shoulder without contrast	L	R	
Oruein	ig Filysician.		73218 Humerus without contrast	L	R	
Physician Contact Number:			73221 Elbow without contrast	L	R	
			73218 Forearm without contrast	L	R	
Date of	Order:		73221 Wrist without contrast	L	R	
			73218 Hand without contrast	L	R	
MRI Neurovascular and Spine			72195 Pelvis without contrast	L	R	
	70551 Brain without contrast		73721 Hip without contrast	L	R	
	70553 Brain with & without contrast		73718 Femur/Thigh without contras	t L	R	
	70544 MRA Head without contrast		73721 Knee without contrast	L	R	
	70546 MRA Head with & without contrast		73718 Tib-Fib/Calf without contrast	L	R	
	70544 MRV Head without contrast		73721 Ankle without contrast	L	R	
	70546 MRV Head with & without contrast		73718 Foot without contrast	L	R	
	70551 IACs without contrast		Please specify – hindfoot – midfoot -	-fore	foot	
	70553 IACs with & without contrast					
	70553 Pituitary with & without contrast	MRI Bo	ody			
	70540 Orbits, Face and/or Neck without		74181 Abdomen without contrast			
	contrast (please specify region)		74183 Abdomen with & without con-	rast		
	70543 Orbits, Face and/or Neck with &		74185 MRA Abdomen with & withou	t con	trast	
	without contrast (please specify region)		74181 MRCP (Abdominal Biliary)			
	70547 MRA Neck without contrast		72195 Pelvis without contrast			
	70549 MRA Neck with & without contrast		72197 Pelvis with & without contras	Ē		
	72141 Cervical Spine without contrast		72197 Prostate with & without contr	ast		
	72156 Cervical Spine with & without		o 76377 Prostate post-proces	sing		
	72146 Thoracic Spine without contrast					
	72157 Thoracic Spine with & without					
	72148 Lumbar Spine without contrast	Other	Exam, please write below:			
	72158 Lumbar Spine with & without					
	72195 Sacrum without contrast					
	72197 Sacrum with & without contrast					
Clinica	ıl Indication/Diagnosis:					
Specia	l Instructions/Precautions/Interpreter?	Physic	cian Signature:			

Date: _____