



1728 Villagepark Drive
Orangeburg, SC 29118

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www.ClermontRadiology.com

Patient Name: _____

Patient Phone: _____ DOB: _____

Report only CD Portal

Diagnosis: _____

MRI				Mammogram	DEXA
Brain	IACs			Screening Diagnostic Unilateral L R	Bone Densitometry
Orbits	Face	Sinus	Neck		
Pituitary					
C-Spine					
T-Spine					
L-Spine					
Chest					
Abdomen:	Kidney	Adrenal	MRCP		
Pelvis					
Humerus					
Shoulder		L R			
Elbow		L R			
Wrist		L R			
Hand		L R			
Hip		L R			
Knee		L R			
Ankle		L R			
Foot		L R			
Forearm		L R			
Femur		L R			
Tib/Fib		L R			
Other _____					

MRA
MRA Head (circle willis)
MRA Neck (carotids)
MRA Abdomen (aorta)
MRA Lower Exremity
MRA Pelvis (run off)
MRA Renal Arteries
MRV Head
MRCP
Other _____

CT Scan	Authorizations	Xray
Head	Authorization #:	C-Spine
Sinuses	_____	T-Spine
Orbits <input type="checkbox"/> IAC <input type="checkbox"/> Temporal Bones <input type="checkbox"/> Mastoids	Expiration Date:	L-Spine
Max/Facial Bones	_____	Chest PA & LAT
Soft Tissue Neck	Effective Term:	Pelvis
Cervical Spine	_____	Bone Age Study
Thoracic Spine		Abdomen/KUB
Lumbar Spine		Skull
Chest		Sinus
Abdomen Only		Orbits
Pelvis Only		Shoulder L R
Abdomen and Pelvis		Humerus L R
Urogram (abd/pd w/wo)		Elbow L R
Stone Protocol		Forearm L R
Upper Extremity L R		Wrist L R
Lower Extremity L R		Hand L R
Other _____		Ribs L R
		Hip L R
		Femur L R
		Knee L R
		Tib/Fib L R
		Ankle L R
		Foot L R
		Other _____

Ultrasound			
Aorta	Venous Study (vein scan)	Upper	Lower
Kidneys	Scrotum	L	R
Thyroid	Breast _____		
OB	Vas Carotids		
Abdomen Complete	Pelvis Complete/Trans Vag		
Abdomen _____	Other _____		

Physician Name: _____ Physician Phone: _____ Physician Signature: _____

Date: _____ Insurance Carrier: _____ Policy #: _____

Referring Physician Fax #: _____ Attorney Name: _____



Please Fax Front and back of Patient's Insurance Card with Order.

Most insurances accepted!

Financial arrangements available!

Outstanding Services

Scans are scheduled within 24-48 hours!
Results in 24-48 hours / Same-day reads upon request.

Patient Instructions

If you must reschedule or cancel you appointment, please give at least 24 hours notice.
Please arrive 15 minutes prior to your exam.
Wear comfortable clothing without metal, if possible.
Bring any previous relevant images and reports.
We cannot perform an MRI if you have a pacemaker, defibrillator, and/or metal fragments in the eye.
Please inform our staff prior to your appointment of any possible contraindications for your exam.



Scan our code on your smart phone camera to get directions to our Orangeburg location via Google!

