

Diagnostic Imaging Referral Form

Date: _____ Patient's Name: _____ DOB: _____

Insurance: _____ Patient Phone: _____

Diagnosis Code/Reason for Exam: _____

Referring Physician: _____ Phone: _____

Please ask the following questions (as applicable) to rule out contraindications to the exam

Pregnant? ☐ Yes ☐ No | MRI Only: Does the patient have a pacemaker or aneurysm clip(s): ☐ Yes ☐ No

Diagnosis: _____

Patient Clinical Information: _____

Physician comments: _____

Imaging Locations

☐ Diagnostic Imaging - Fairfield

Inside NorthBay Health Plaza

1101 B. Gale Wilson Blvd., Suite 100A, Fairfield, CA 94533

PH (707) 646-4646 | FX (707) 646-4949

☐ Diagnostic Imaging - Vacaville

Inside VacaValley Wellness Center

1020 Nut Tree Rd., Suite 150, Vacaville, CA 95687

PH (707) 646-4646 | FX (707) 646-4949

■ MRI

Contrast ☐ Yes ☐ No

MR Neuroradiology & ENT

- ☐ Brain
 - ☐ w/fiducials
 - ☐ w/o fiducials
- ☐ Nasopharynx (w/ Neck)
- ☐ Stealth Brain
- ☐ Internal Auditory Canal
- ☐ Pituitary
- ☐ TMJ
- ☐ Orbits
- ☐ Sinus

- ☐ MRI Biopsy
- ☐ Breast
- ☐ MR Body MRA
- ☐ MRA Abdomen
- ☐ MRA Thoracic
- ☐ Renal MRA

MR Spine

- ☐ Cervical Spine
- ☐ Thoracic Spine
- ☐ Lumbar Spine
- ☐ MR Vascular
- ☐ Intracranial MRA
- ☐ Cervical Carotids/Neck MRA

MR Vascular

- ☐ Pelvis
- ☐ Abdomen
- ☐ Pancreas
- ☐ Liver
- ☐ Pelvis
- ☐ Breast
- ☐ Right ☐ Left
- ☐ Mass ☐ Leak
- ☐ TMJ

MR Body

- ☐ Pelvis
- ☐ Abdomen
- ☐ Pancreas
- ☐ Liver
- ☐ Pelvis
- ☐ Breast
- ☐ Right ☐ Left
- ☐ Mass ☐ Leak
- ☐ TMJ

MR Arthrograms

- ☐ Right ☐ Left
- ☐ Shoulder
- ☐ Elbow
- ☐ Wrist
- ☐ Hip
- ☐ Knee
- ☐ Ankle
- ☐ Other: _____

Musculoskeletal

- ☐ Right ☐ Left
- ☐ Shoulder
- ☐ Elbow
- ☐ Wrist
- ☐ Hand
- ☐ Finger
- ☐ Hip
- ☐ Knee
- ☐ Ankle
- ☐ Foot

■ Ultrasound

US Abdomen

- ☐ Abdomen complete
- ☐ Abdomen w/Doppler
- ☐ Renal/Bladder only

US Biopsy

- ☐ Breast

US OB/GYN

- ☐ Pelvis (Uterus & Ovaries)
- ☐ Pelvis w/transvaginal imaging
- ☐ First Trimester OB
 - ☐ Singleton
 - ☐ Twin
- ☐ Second/Third Trimester OB
 - ☐ Singleton
 - ☐ Twin
- ☐ Fetal Survey
 - ☐ Singleton
 - ☐ Twin

US Superficial Structures

- ☐ Thyroid/Parathyroid
- ☐ Scrotum

US Vascular

- ☐ Venous (DVT): Upper Extremity
 - ☐ Right
 - ☐ Left
 - ☐ Bilateral
- ☐ Venous (DVT): Lower Extremity
 - ☐ Right
 - ☐ Left
 - ☐ Bilateral
 - ☐ Carotid

US Miscellaneous

- ☐ Neurosonogram
- ☐ Spine
- ☐ Hips w/ stress, bilateral
- ☐ Soft tissue-give location: _____
- ☐ Other: _____

■ X-Ray

X-Ray Thorax

- ☐ Chest 2 Views
- ☐ Ribs
- ☐ Sternum
- ☐ Clavicle
- ☐ Sterno-clavicular Joints
- ☐ AC Joints
- ☐ Abdomen

X-Ray Spine

- ☐ Cervical Spine
- ☐ Thoracic Spine
- ☐ Thoracolumbar Spine
- ☐ Lumbar Spine
- ☐ Sacrum I Coccyx
- ☐ Scoliosis Series
- ☐ Pelvis

X-Ray Lower Extremity

- ☐ Right ☐ Left ☐ Bilal
- ☐ Hip
- ☐ Femur
- ☐ Knee
- ☐ Tibia/Fibula
- ☐ Ankle
- ☐ Foot
- ☐ Heel
- ☐ Toe
- ☐ Hip-to-Ankle

X-Ray Upper Extremity

- ☐ Right ☐ Left ☐ Bilal
- ☐ Shoulder
- ☐ Humerus
- ☐ Elbow
- ☐ Forearm
- ☐ Wrist
- ☐ Hand
- ☐ Finger

X-Ray Head

- ☐ Skull
- ☐ Facial Bones
- ☐ Nasal Bones
- ☐ Orbits
- ☐ Mandible

X-Ray Misc. Exams

- ☐ Bone Survey
- ☐ Myeloma
- ☐ Bone Age
- ☐ Shunt Series
- ☐ Steroid Injection
- ☐ Other: _____

EOS (Fairfield Only)

- ☐ Full Spine
- ☐ Bilat Leg
- ☐ Full Body

■ CT

Contrast ☐ Yes ☐ No

CT Neuroradiology & ENT

- ☐ Brain
- ☐ Orbits
- ☐ Temporal Bone
- ☐ Neck
- ☐ Maxillofacial
- ☐ Sinus
- ☐ CT Angiogram
- ☐ Head & Neck

CT Spine

- ☐ Cervical Spine
- ☐ Thoracic Spine
- ☐ Lumbar Spine

CT Body

- ☐ Chest
- ☐ Abdomen
- ☐ Pelvis
- ☐ CTA Aorta

CT Cardiac

- ☐ CTA
- ☐ Coronary Calcium Score

CT Miscellaneous

- ☐ Bilateral lower extremity runoff

■ Digital Mammograms

- ☐ Screening
- ☐ Breast Implants
- ☐ Diagnostics
- ☐ Uni
- ☐ Bilat
- ☐ 3D Tomo-synthesis

Advanced Diagnostic Imaging

Walk-ins welcome for

X-ray and Bone Density exams.

Appointment needed for

MRI, Ultrasound, PET, CT, Breast Biopsy, and Mammography exams.

Our other services include:

- Traditional X-rays
- Ultrasound
- PET
- Nuclear Medicine
- MRI
- Interventional Radiology
- CT or CAT Scan

**Call to schedule
an appointment:**

(707) 646-4646
(Hold for an interpreter)



Fairfield Diagnostic Imaging (Inside NorthBay Health Plaza)



1101 B. Gale Wilson Blvd., Suite 100A | 8 a.m. to 5 p.m.*
Closed for lunch, 12 - 1 p.m.

Fairfield MRI



1100 B Gale Wilson Blvd. | Mon - Fri: 7 a.m. to 10:30 p.m.
Sat & Sun: 7 a.m. to 3:30 p.m.

*Hours may vary.

Vacaville Diagnostic Imaging (Inside VacaValley Wellness Center)



1020 Nut Tree Rd., Suite 150 | 8 a.m. to 5 p.m.*
Closed for lunch, 12 - 1 p.m.

Vacaville MRI



1002 Nut Tree Rd. | Mon - Fri: 7 a.m. to 10:30 p.m.
Sat & Sun: 7 a.m. to 3:30 p.m.

*Hours may vary.