



# PET/CT SCHEDULING CAMP LOWELL SPECIAL PROCEDURES

**Radiology Ltd.**  
**Diagnostic Imaging Services**  
PET Scheduling Tel: (520) 901-6749  
Toll Free Tel: 1-866-565-2220 Toll Free Fax: 1-866-707-0750

Appt. Time: \_\_\_\_\_  
Date: \_\_\_\_\_  
Check-in Time: \_\_\_\_\_

**To schedule an appointment, please call (520) 901-6749 or fax to (520) 545-1939.  
Please include all pathology, operative reports, progress notes, and prior imaging reports to ensure timely processing.**

PHYSICIAN'S NAME: \_\_\_\_\_ PHONE #: (\_\_\_\_) \_\_\_\_\_ FAX #: (\_\_\_\_) \_\_\_\_\_  
If physician practices at multiple locations, please include address for these results to be sent: \_\_\_\_\_  
PATIENT: (First Name) \_\_\_\_\_ (Last Name) \_\_\_\_\_ (Middle Initial) \_\_\_\_\_  
DOB: \_\_\_\_\_ HOME PHONE: (\_\_\_\_) \_\_\_\_\_ WORK PHONE: (\_\_\_\_) \_\_\_\_\_ BEST TIME TO CONTACT: \_\_\_\_\_ AM PM  
PATIENT INSURANCE: \_\_\_\_\_ POLICY/GROUP#: \_\_\_\_\_ INS. PHONE: (\_\_\_\_) \_\_\_\_\_  
PRIOR AUTHORIZATION # (if needed): \_\_\_\_\_ Would you like authorization assistance?  YES  NO  
**Please note:** We are unable to provide authorization assistance for STAT cases and CareMore, Humana and United Healthcare insurance plans.  
**When scheduling, please include all clinical information and a copy of the insurance card with the order.**

### Specialty PET/CT Exams

(Please note: Specialty exams have to be reviewed and have limited scheduling times)

#### Exam Requested:

- |  |  |   |                                     |
|--|--|---|-------------------------------------|
| <input type="checkbox"/> PET/CT Skull Base to Mid-Thigh<br>(78815) <i>(all other diagnosis)</i>  | <input type="checkbox"/> PET/CT Bone Scan<br>w/Sodium Fluoride (78816)<br><i>(Sodium fluoride PET bone scans<br/>are not covered by Medicare.)</i> | <input type="checkbox"/> PET/CT Axumin (78815)              | <input type="checkbox"/> Staging    |
| <input type="checkbox"/> PET/CT Myocardium (78459)   | <input type="checkbox"/> PET/CT Brain (78608)  | <input type="checkbox"/> PET/CT Gallium<br>Dotatate (78815) | <input type="checkbox"/> Re-staging |
| <input type="checkbox"/> PET/CT Whole Body (78816)<br><i>(Diagnosis: Melanoma, Myeloma,<br/>Sarcoma, and Merkel Cell Carcinoma<br/>Cutaneous Lymphoma)</i> | <input type="checkbox"/> Other _____   |   | <input type="checkbox"/> History of |

Primary Diagnosis: \_\_\_\_\_

Signs & Symptoms: \_\_\_\_\_

Special Instructions: \_\_\_\_\_

#### Previous Studies / Reports:

Biopsy: \_\_\_\_\_ Date: \_\_\_\_\_

CT: \_\_\_\_\_ Date: \_\_\_\_\_

MRI: \_\_\_\_\_ Date: \_\_\_\_\_

PET: \_\_\_\_\_ Date: \_\_\_\_\_

Path Avail  Yes  No

Referring Physician's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

The information contained in this facsimile message is CONFIDENTIAL and/or LEGALLY PRIVILEGED information intended only for the use of the facility named above. If you have received this in error, please call (520) 545-1969.



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If you are unable to keep your appointment, please call PET Scheduling at (520) 901-6749 to reschedule your appointment.



**1 Radiology Ltd. - Camp Lowell**

4640 E Camp Lowell Dr.  
Tucson, AZ 85712