



X-RAY / EKG / PACEMAKER REQUEST

Phone: (718) 217-8000 • Fax: (718) 217-5485

Emergency Tel: 1-800-926-9120 • www.statpxray.com

Name: _____ SS # _____ Date: ___/___/___ Male Female

Facility _____ Date of Birth: ___/___/___ Room # _____

Medicare # _____ Medicaid # _____

Other Ins ID _____ Pre-authorization _____

Order Placed By: _____ Requesting Physician: _____ Tel: _____

CHEST AP 1 View 71010

- A15.0 Tuberculosis of lung
- I27.9 Pulmonary heart disease
- I10 Essential (primary) HTN
- I48.2 Chronic atrial fib
- I50.9 Heart failure
- I51.7 Cardiomegaly
- J18.9 PNA, unsp organism
- J90 Pleural effusion, not classified
- J91.8 Pleural effusion in other conditions
- J81.1 Chronic pulm edema
- J81.0 Acute pulm edema
- J98.9 Resp disorder, unsp
- R50.9 Fever, unsp
- R06.02 SOB
- R06.2 Wheezing
- R05 Cough
- R07.9 CP, unsp
- R04.2 Hemoptysis – blood sputum
- Z93.0 Tracheostomy present
- Z11.1 TB screening
- J20.9 Acute bronchitis, unsp
- R09.89 Circulatory & respiratory symptoms
- Acute bronchitis due to: _____ indicate
- Pre op / Clearance: _____ symptoms

PICC LINE - 2 Views Chest & Humerus

- Z95.9 PICC LINE STATUS

THORAX

R or L Ribs 71100/71110

- J90 Pleural effusion, classified
- J98.11 Atelectasis
- J95.9 Pneumothorax
- Fracture _____ indicate
- Pain _____ indicate

LOWER EXTREMITIES

- Bilateral Hips & Pelvis 3 views 73520
- Pelvis 1 views 72170
- R or L Hip 2 views 73510
- R or L Femur 4 views 73550
- R or L Knee 2 views 73560
- R or L Tibia/Fibula 2 views 73590
- R or L Ankle 3 views 73610
- R or L Foot 3 views 73630
- R or L Heel 2 views 73650
- R or L Toe (digit) 3 views 73660

- M06.9 Rheumatoid arthritis, unsp
- M15.9 Polyosteoarthritis, unsp
- M81.0 Osteoporosis
- M86.9 Osteomyelitis
- R29.6 Repeated falls/falling
- Z91.81 Personal history of falling
- Z09 Follow up surgery
- K26.9 Duodenal ulcer, unsp acute/chronic, w/ hemorrhage/perforation

- Pain _____ indicate
- Sprain _____ indicate
- Contusion _____ indicate
- Effusion of joint _____ indicate
- Dislocation of joint _____ indicate
- Fracture (describe) _____ indicate

UPPER EXTREMITIES

- R or L Clavicle 2 veivs 73000
- R or L Shoulder 2 veivs 73030
- R or L Scapula 2 veivs 73010
- R or L Humerus 2 veivs 73060
- R or L Elbow 2 veivs 73070
- R or L Forearm 2 veivs 73090
- R or L Wrist 3 veivs 73110
- R or L Hand 3 veivs 73130
- R or L Finger (digit) 3 veivs 73140

- M79.5 Residual foreign body in soft tissue
- M81.0 Age-related osteoporosis
- J93.9 Pneumothorax, unsp
- J98.11 Atelectasis
- Pain _____ indicate
- Fracture (describe) _____ indicate
- Dislocation of joint _____ indicate
- Contusion _____ indicate

ABDOMINAL

- KUB AP view 74000
- Erect & flat 2 views 74020

- Pain RUQ LUQ RLQ LLQ
- K56.60 Intestinal obstruction
- R14.0 Abdominal distension (gaseous)
- R14.1 Gas pain
- R14.3 Flatulence
- R11.10 Vomiting, unsp
- R19.7 Diarrhea, unsp
- K59.00 Constipation, unsp
- R18.8 Other ascites
- Z93.1 Gastrostomy status
- Foreign body of alimentary tract, unsp
- initial encounter subsequent sequela

Other sign/symptoms: _____ indicate

HEAD

- R or L Mandible 70100
- Facial Bones 4 veivs 70140
- Nasal Bones 4 veivs 70160
- Orbits 4 veivs 70200
- Sinuses 4 veivs 70210
- Skull 2 veivs 70260

- R42 Dizziness and Giddiness
- J01.81 Acute sinusitis, recurrent
- J32.9 Chronic sinusitis, unsp
- M79.5 Residual foreign body in soft tissue
- R29.6 Repeated falls/falling
- Z91.81 Personal history of falling
- R22.0 Swelling, mass or lump
- Pain (location) _____ indicate
- Fracture (describe) _____ indicate
- Other sign/symptoms: _____ indicate

SPINAL COLUMN

- Cervical Spine 2 veivs 72040
- Thoracic Spine 2 veivs 72070
- Lumbar Spine 2 veivs 72100
- Sacrum & Coccyx 2 veivs 72220

- M54.6 Pain (thoracic)
- Q76.49 Congenital malformation of spine
- M43.0 Spondylolysis

EKG (12 Lead) 93000

- I10 HTN Essential (primary)
- I11.0 Hypertensive heart disease w/ heart failure
- I11.9 Hypertensive heart disease w/o heart failure
- R00.2 Palpitations
- R42 Dizziness/Giddiness
- R55 Syncope/collapse
- I47.9 Tachycardia Paroxysmal
- I47.2 Tachycardia Ventricular
- R07.9 Chest pain
- I21.3 (STEMI) ST elevation myocardial infarction
- I25.2 Old myocardial infarction
- I27.9 Pulmonary heart disease
- I49.9 Cardiac arrhythmia, unsp
- I50.9 Heart failure, unsp
- I95.9 Hypotension, unsp
- J81.0 Acute pulmonary edema
- J96.91 Respiratory failure w/ hypoxia
- J96.90 Respiratory failure unsp
- Pain (location): _____ indicate
- Pre op / Clearance: _____ symptoms

PACEMAKER 93293

- Z95.0 Presence of cardiac pacemaker
- Other sign/symptoms: _____ indicate

Previous History: _____

Other Exam: _____

Other Diagnosis: _____

Physician Sig.

Refusals:

- Patient Refused Not Avail

Date: _____ Nurse: _____

Tech: _____

Completed Exams:

Date: _____ Nurse: _____

Tech: _____