Tax ID#95-3636521



GROSSMAN IMAGING CENTERS

805-988-0616 • Fax 805-988-0997

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Data	of Exam	
Date	JI LXaIII	

1AM2SOAQ	☐ PET/CT	□ ст	☐ BONE SCAN

Facility: Grossman Ventura____

Grossman Oxnard____

Time of Exam
Scheduled by

2900 Loma Vista Rd., Suite 101	2151 E. Gonzales Rd., Suite 101			
1. Patient Name:				
D.O.B	Height Weight			
Home Phone	Cell Phone			
2. Ordering Physician	Diagnosis			
3. ICD9Biopsy Result:	s			
4. Exam Requested: ☐ 78815 - Head ☐ 78816 - For Melanoma Head to ☐ 78608 - Brain (Alzheimer's & De ☐ 78320 - Bone Scan - PET Whole Bo	Toe			
5. The CT Performed with PET/CT is lin	nited. If a complete diagnostic CT is needed			
please request the area to be examir	ned: 🗆 Head 🕒 Neck 🗅 Chest			
	☐ Abdomen ☐ Pelvis ☐ w/Contrast			
For Contrast CT —				
Results from BUN & Creating	nine within last 30 days/			
6. Previous Correlative Exams:	CT			
Date of Exam:				
Institution where CT, MRI, or PET wa	s performed:			
Grossman Imaging Center	☐ Community Memorial Hospital			
Ventura Coast Imaging	☐ Pueblo Radiology			
St. John's Hospital	☐ Other:			
7. Insurance	Authorization			
8. Please fax copies of pathology, ** card with this form to: (805) 9	correlative exam reports, ** and insurance 88-0997			
9. All correlative CT, MRI and/or PET in order to facilitate a timely PET in	films should be present at time of procedure nterpretation.			
Physician Signature				
Contact at Doctors Office:				

^{**}Please note: Absence of previous reports will delay results.

PET/CT and PET/CT BRAIN SCAN PREP INSTRUCTIONS

Please fast 6 hours prior to your appointment. This includes gum, candy, coffee or breath mints.

<u>Medications.</u> You may also take any medications that are tolerated on an empty stomach, as long as they do not have any sugar in them. Please bring a list of your current medications, with dosages.

Diabetic. If you are diabetic, we ask that you closely monitor your blood sugar for a couple of days before your test. Our cutoff is 180, and we will be unable to do your test if your level is higher than that. You must not use any insulin within two hours of your test, or we will not be able to do your exam.

Follow a low carb diet 1-2 days before your test and no caffeine 24 hours prior. While on a low carb diet, you will need to avoid foods like rice, pasta, tortillas, bread, cookies, cakes, and starchy vegetables such as corn, peas and potatoes, You can continue to eat all protein, like meat, fish, and eggs. You can also eat dairy products and non-starchy vegetables, but keep fruit to a minimum.

Please avoid vigorous exercise or any hard physical labor for 48 hours prior to your PET scan. This includes heavy lifting, yard work, golfing or any activity that requires you to use your muscles.

Please wear loose comfortable clothing that is free of any zippers, buttons or snaps. You will be asked to remove jewelry, as well as dentures and partials.

PET BONE SCAN (Sodium Fluoride)

PET Bone Scan: No special preparation required.

You will be in our department for approximately 1-3 hours, depending on the type of PET scan you are having. The PET scan will not affect your ability to drive, unless you have requested sedation.

People who are not patients are unable to wait in the injection rooms or scan room. Family/friends are welcome to remain in the reception area or come back when the patient's PET/CT scan is completed.

PLEASE DO NOT HAVE SMALL CHILDREN OR PREGNANT WOMEN ACCOMPANY YOU TO YOUR EXAM. Please make arrangements for childcare if necessary and avoid close contact with small children and pregnant women for at least 4 hours following the end of your PET examination.

If for any reason you think you may need to reschedule or cancel your exam, please call 988-0616, 24 hours prior, so that we can cancel your dose.