

RIVERVIEW EAST
148 EAST AVENUE, SUITE 1J
NORWALK, CONNECTICUT
PHONE (203) 838-4886
FAX (203) 866-5219
www.norwalkradiology.com



EXAM DATE _____

EXAM TIME _____

PATIENT NAME: _____ DOB: _____ PHONE #: _____

INSURANCE: PRIMARY _____ SECONDARY _____

PRECERTIFICATION: _____

CLINICAL HISTORY/

SIGNS AND SYMPTOMS: _____

REFERRING PHYSICIAN: _____ (SIGNATURE)

BREAST IMAGING

Digital Mammography with Computer Aided Detection

SCREENING

- Screening Mammogram
- Screening Breast Ultrasound
(requires mammogram within past 3 months)

DEXA SCAN

ICD-9 Codes that Support Medical Necessity

- 627.2 Symptomatic menopausal or female climacteric states
- 733.00 Osteoporosis, unspecified
- 733.01 Senile osteoporosis (Postmenopausal osteoporosis)
- 733.02 Idiopathic osteoporosis
- 256.2 Postablative ovarian failure
- 256.31–256.39 Other ovarian failure
- 733.90 Disorder of bone and cartilage, unspecified (Osteopenia)
- 733.09 Other osteoporosis (Drug-induced osteoporosis)
- 252.0 Hyperparathyroidism
- 805.00–805.9 Fracture of vertebral column without mention of spinal cord injury
- 806.00–806.9 Fracture of vertebral column with spinal cord injury
- E932.0 Drugs, medicinal and biological substances causing adverse effects in therapeutic use, adrenal cortical steroids

Other Indications

Please check with individual insurance about coverage.

- Screening for Osteoporosis
- Other _____

DIAGNOSTIC

- Diagnostic Breast Consultation
(Diagnostic Mammogram and/or Breast Ultrasound, as needed)
____LT____RT Location_____
- Diagnostic Breast Ultrasound
____LT____RT Location_____

WOMEN'S ULTRASOUND

With Color Doppler

- Abdomen
- Pelvis (Endovaginal)
- Pelvis (Full Bladder)
- Thyroid
- Carotid
- Extremity ____LT ____RT _____specify

VEIN THERAPY

- Consultation for Varicose/Spider Veins

OTHER SERVICES

(Please Specify)

- CT _____
- MRI _____
- X-Ray _____
- Lung Cancer Screening
- Cardiac Scoring
- Other _____

**SUITE FOR WOMEN'S IMAGING
NORWALK RADIOLOGY AND MAMMOGRAPHY CENTER
PATIENT INSTRUCTIONS**

If You Have Any Questions, Please Call (203) 838-4886

MAMMOGRAM

Do not use powders, talc, lotion or deodorant on the breast or in the underarm area the day of your exam. For your comfort and convenience, two-piece outfits are recommended. ***If you have had mammograms in the past at any other facility, please bring the films with you to your scheduled exam.***

BONE DENSITY/DEXA

Do not take calcium supplements the day of the exam. Avoid wearing metal buttons and buckles.

ULTRASOUND

Abdomen:

Nothing by mouth after midnight the evening prior to the exam. Small amounts of clear fluids are allowed and essential medication can be taken with a sip of water. If you are a diabetic, consult with your doctor. If the exam is in the afternoon, small amounts of clear, non-fat liquids (water, black coffee, clear tea, fruit juice, jelly) are allowed up to two hours prior to the exam.

Pelvic:

Drink 32 ounces of water 1½ hours prior to your exam so that you arrive with a full bladder.

Transvaginal:

No special preparation, unless otherwise instructed.

INSURANCE NOTE:

It is important that patients are familiar with, and verify, the applicable requirements and coverage details of their insurances before they come for their exams. Some carriers require precertification or referrals for certain exams.

You must present all of your current insurance cards (primary and secondary) at the time of your appointment.

**FOR MORE INFORMATION ABOUT
YOUR EXAM**

www.norwalkradiology.com

DIRECTIONS FROM I-95 To:

148 East Avenue, Riverview East, Suite 1J

North: Exit 16. Turn left at light at end of ramp onto East Avenue. At second light, turn left into 148 Riverview East. Follow driveway down to open parking lot area and enter building by the flagpole.

South: Exit 16. Turn right at light at end of ramp onto East Avenue. At first light, turn left into 148 Riverview East. Follow driveway down to open parking lot area and enter building by the flagpole.

