



Call 270-691-1877—Fax: 270-691-1841 order & Insurance Cards

Owensboro Heart & Vascular
1200 Breckenridge Street
Owensboro, KY 42303
Phone: (270) 683-8672
Fax: (270) 685-8223

OWENSBORO Medical Practice

Patient Exam Order Request

Date: _____

OMP Chart #: _____

SS#: _____ - _____ - _____

Patient's Name: _____ DOB: ____/____/____

Phone No.: (____) _____ Referring Provider: _____

Diagnosis / Symptoms: _____ **Send Copy of Insurance Card**

Prior Authorization Code: _____

Allergic to Contrast: Yes No If yes, needs to be premedicated. If stat study, OHV to do IV medication.

Diabetic Yes No

Lab—BMP within 1 week to 3 days—fax results to 685-8223. **Request BMP Order:** Yes No

Nuclear Medicine

PET / CT Camera 78492 Weight Limit: 450 lbs

****Cardiac PET ** Study will be performed in place of Myocardial Perfusion (SPECT) unless otherwise mandated by Insurance.**

FDG—Oncology—neck/ thigh

Nuclear Camera Table Wt 300 lbs

Myocardial Perfusion (SPECT) 78452

- Dobutrex

- Exercise

- Persantine

Hepatobiliary Scan (HIDA Scan) 78227

MUGA 78472

CT Angiography Weight Limit 500 lbs

Cardiac Cardiac Cash \$1,500

AAA AIF Pulmonary Embolus (PE)

Carotid Iliac Intracranial

TAA Renal

Subclavian SMA

Screening Exams

Calcium (Heart) Score (CT) \$229.

Whole Body Scan (CT) \$649.

Virtual Exam (CT, US & BMD) \$899.

Vascular Screening (US) \$199.

ECP Treatment (External Counter Pulsation)

Please call patient / please call provider

Ultrasound Exams Wt Limit 450 lbs

Echocardiogram 93306

Saline Echo / Bubble Study / Limited Echo will be done with any diagnosis of dizziness or TIA symptom 93308

Stress Echo: Dobutamine / Exercise
Diagnosis: Pulmonary HTN 93351

Aorta 93978 Iliac Artery 93978
Carotid Arteries 93880

Gallbladder (Right upper quadrant) 76705TC

Mesenteric 93976

Abdominal U/S complete (liver, pancreas, spleen) 76700TC

Abdominal U/S limited (Rt upper quad) 76705

Renal Doppler & Duplex (artery) 93975

Soft tissue 76880 Pelvic Vein 93979

Testicular 76870 Thyroid 76536

Non-Invasive Arterial Duplex Study with Segmental pressures

: Lower Arterial Duplex + ABI

: Upper Arterial Duplex + RBI

Venous Duplex Lower Ext. L / R

Venous Duplex Upper Ext. L / R

VNUS Consult with Dr. Vora or Dr. Shama

Diagnostics

24-Hour Holter Monitor

24-Hour Blood Pressure monitor

24-Hour Pulse Ox Monitor

Autonomic Nervous System (ANSAR)

Event Monitor

Pulmonary Function Test with DLCO

Shape HF

Telemetry Monitoring
Tilt Table—Wt Limit 450 lbs 93660

Treadmill—Wt Limit 375 lbs

Vendys—Vascular Reactivity Testing

CT Diagnostic Exams Wt Limit 500 lbs

Abdomen w/out contrast (oral only) 74150

Abdomen with contrast 74160

Abdomen with & w/out contrast 74170

Abdomen & Pelvis w/out contrast 74176

(renal stone protocol)
Abdomen & Pelvis with contrast 74177

Abdomen & Pelvis w & w/out contrast 74178
(oral & IV)

Chest w/out contrast 71250

Chest with contrast 71260

Chest High Resolution without

Head w/out contrast 70450

Head with & w/out contrast 70470

Neck (soft tissue) with contrast 70491

Pelvis w/out contrast 72192

Pelvis with contrast 72193

Pelvis with & w/out contrast 72194

Sinus w/out contrast 70486

Cervical Spine w/out contrast 72125

Thoracic Spine w/out contrast 72128

Lumbar Spine w/out contrast 72131

CT Low Ext/Hip w/out contrast 73700

CT Upper Extremities w/out contrast 73200

Other: _____

Bone Mineral Densitometry Table Wt 400

Dexa Scan 77080 (q 2 years + 1 day)

X-Ray Exams: _____ Table Wt 250

Provider Signature: _____