DMG Delano Medical Group | Dignity Health Medical Network

IMAGING REQUEST

☐ Call Report ☐ Send Films
☐ Additional Report to: _____

Patient's Name	Phone Number	DOB	Referring Physician	Date Requested

Is patient pregnant? ☐ yes ☐ no
Any allergies? ☐ yes ☐ no
If yes, indicate: _____

Clinical History/Diagnosis: _____

Exam: _____

RADIOLOGY

- ☐ Chest - 1 View
- ☐ Chest - 2 Views
- ☐ Ribs - Right
- ☐ Ribs - Left
- ☐ Abdomen (KUB)
- ☐ Abdomen Series (CXR, KUB, Abdomen Upright)
- ☐ Head/Spine/ Extremities

ULTRASONOGRAPHY

Obstetrical
- ☐ Complete
- ☐ Biophysical Profile
- ☐ Pelvic
- ☐ Endovaginal

Abdominal
- ☐ Bladder Scan
- ☐ Gallbladder/Liver/ Pancreas
- ☐ Kidneys/ Retroperitoneal
- ☐ _____ Specify Where

VASCULAR STUDIES

- ☐ Cartoid duplex/vertebral with color flow
- ☐ Extremities:
  - ☐ Upper ☐ Arterial ☐ Left
  - ☐ Lower ☐ Venous ☐ Right

ABDOMEN / G.I. / G.U.

- ☐ Esophagus
- ☐ UGI
- ☐ SB
- ☐ BE
- ☐ BE with air
- ☐ GB
- ☐ Double Dose GB
- ☐ IVP
- ☐ IV with Tomos

MAMMOGRAPHY

- ☐ Bilateral
- ☐ Unilateral ☐ Left ☐ Right
- ☐ Breast - u/s
- ☐ Spot compression as recommended by radiologist

MISCELLANEOUS STUDIES

- ☐ Other _____

Specify Where _____

CTs, MRIs, NUCLEAR MEDICINE AND INVASIVE STUDIES REQUIRE PRIOR AUTHORIZATION

Physician's Signature _____ Date _____

Locations

Appointment Date and Time

APPOINTMENT DATE	APPOINTMENT TIME

Appointment Locations

☐ **Delano Regional Medical Center**
1401 Garces Hwy.
Delano, CA 93215
Phone: 661.721.5280

☐ **Valley Imaging Medical Group, Inc.**
1311 Jefferson St.
Delano, CA 93215
Phone: 661.721.3510

☐ **Truxtun Radiology Medical Group** ⁂
9900 Stockdale Hwy.
Suites 100 & 109
Bakersfield, CA 93311
Phone: 661.325.6800

☐ **Truxtun Radiology Medical Group** ⁂
1817 Truxtun Ave.
Bakersfield, CA 93301
Phone: 661.325.6800

⁂ Truxtun Radiology Medical Group **does not** participate with GEMCare Health Net Medi-Cal

☐ **Kern Radiology**
3838 San Dimas St., A-120
Bakersfield, CA 93301
Phone: 661.324.7000
Fax: 661.334.3164

☐ **Kern Radiology**
2301 Bahamas Dr.
Bakersfield, CA 93309
Phone: 661.324.7000
Fax: 661.334.3164

☐ **Kern Radiology**
4500 Morning Dr, #202
Bakersfield, CA 93309
Phone: 661.324.7000
Fax: 661.334.3164

☐ **Kern Radiology**
9330 Stockdale Hwy, #100
Bakersfield, CA 93311
Phone: 661.324.7000
Fax: 661.334.3164

THIS FORM IS AVAILABLE AT: MCSOnline/Provider Resources/Forms/Authorization Forms/Imaging Request