

PHYSICIANS ORDER

PATIENT INFORMATION

Patient Name

DOB: ____ / ____ / ____

Gender

☐

Male

☐

Female

Referring Physician: _____

Phone: _____

NPI: _____

Fax: _____

Diagnosis Code: _____

☐

Routine

☐

STAT
Report

Referring Physician Signature: _____

Date: _____

X-RAY

- ☐ Sinuses 3V
- ☐ Cervical Spine 2V / 4-5V
- ☐ Chest 1V / 2V
- ☐ Ribs Unilateral with PA Chest R / L
- ☐ Ribs Bilateral with PA Chest
- ☐ Thoracic Spine 3V
- ☐ Abdomen 2V
- ☐ Abdomen Complete with Chest
- ☐ KUB
- ☐ Lumbar Spine 2 -3V / 4V
- ☐ Lumbar Spine Bending Views Only
- ☐ Pelvis AP Only

Extremities: R | L

- | | |
|-----------------------------------|------------------------------------|
| ☐ Clavicle | ☐ Hip |
| ☐ Shoulder | ☐ Femur |
| ☐ Humerus | ☐ Knee |
| ☐ Elbow | ☐ Tib / Fib |
| ☐ Forearm | ☐ Ankle |
| ☐ Wrist | ☐ Foot |
| ☐ Hand | ☐ Calcaneus |
| ☐ Finger | ☐ Toe |

☐ Other: _____

CT

IV Contrast:

☐

W/O

☐

W

☐

W+W/O

- ☐ Brain
- ☐ Sinus / Maxillofacial
- ☐ Orbit / IAC
- ☐ Soft Tissue Neck
- ☐ Cervical Spine
- ☐ Chest
- ☐ Thoracic Spine
- ☐ Abdomen
- ☐ Abdomen + Pelvis | Oral Contrast
- ☐ Lumbar Spine
- ☐ Pelvis
- ☐ CTA Head
- ☐ CTA Neck
- ☐ Chest high resolution

Extremities: R | L

- | | |
|-----------------------------------|------------------------------------|
| ☐ Shoulder | ☐ Hip |
| ☐ Humerus | ☐ Femur |
| ☐ Elbow | ☐ Knee |
| ☐ Forearm | ☐ Tib / Fib |
| ☐ Wrist | ☐ Ankle |
| ☐ Hand | ☐ Foot |

☐ Other: _____

- ☐ Lung Screening
- ☐ Calcium Score
- ☐ CTA Chest
- ☐ CTA Abdomen + Pelvis

ULTRASOUND

- ☐ Aorta
- ☐ Abdominal Limited
- ☐ Abdominal Complete
- ☐ Pelvic (Complete)
- ☐ Pelvic (Transvaginal)
- ☐ Renal
- ☐ UB Pre + Post-Void
- ☐ OB First Trimester
- ☐ OB Complete > 14 Weeks
- ☐ Scrotal / Testicular
- ☐ Thyroid
- ☐ Soft tissue Neck
- ☐ Carotid
- ☐ Renal Artery Doppler
- ☐ Arterial Doppler Lower Extremity R / L
- ☐ Venous Doppler Lower Extremity R / L
- ☐ Extremity Non-Vascular R / L

☐ Other: _____



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Fax: (850) 331-1595

Patient Name: _____
Patient Phone: _____
Date of Birth: _____
Gender: _____

☐ Insurance Bill ☐ Patient Bill ☐ Client Bill

 = In-House Lab (Same Day Results)*
*Labs drawn prior to 3PM

Panels		Individual Tests		Individual Tests (cont.)		Other Tests	
BMP		Drug Screen, Urine		Sex Hormone Binding Globulin (SHBG)			
CMP		ESR (Sed Rate)		T3 Total			
CBC w/ Auto Differential		Estradiol		T3 Free			
Electrolyte Panel		Ferritin		T4 Total			
Hepatic Function Panel		Folate/Folic Acid		T4 Free			
Hepatitis Panel		Follicle Stimulating Hormone (FSH)		Testosterone Free			
Lipid Panel		Gamma Glutamyl Transferase (GGT)		Testosterone Total			
Renal Function Panel		Glucose Serum/Plasma		Thyroglobulin			
Individual Tests		HDL Cholesterol		Thyroglobulin AB			
ABO Rh Type		Hematocrit		Thyroid Peroxidase AB		Diagnosis Code(s)	
Albumin		Hemoglobin		Triglycerides		1. _____ 2. _____ 3. _____ 4. _____ 5. _____ 6. _____	
Albumin:Creatinine Ratio		Hemoglobin A1C		Troponin-I			
Alkaline Phosphatase		Homocysteinine		TSH			
ALT (SGTP)		Insulin		Uric Acid			
Ammonia		Iodine		Urinalysis			
Amylase		Iron, Total		Urine Culture			
Anti-Mullerian Hormone (AMH)		Iron Binding Capacity, Total (TIBC)		Vitamin B12		Referring Provider	
Anti-Nuclear Antibody (ANA)		Lactate Dehydrogenase (LDH)		Vitamin D 1,25-Dihydroxy (Calcitrol)			
aPTT		LDL Cholesterol, Direct		Vitamin D, 25-Hydroxy			
AST (SGOT)		Lead		Zinc			
BNP		Leutinizing Hormone (LH)		ID and Screening			
Bilirubin, Direct		Lipase		COVID-19 PCR			
Bilirubin, Total		Magnesium		FLU A&B/RSV/Influenza PCR		Signature	
BUN		Phosphorus		GC/Chlamydia (Urine) PCR			
CA-125		Potassium		Fecal Occult Blood Test (FOBT)			
Calcium		Preg hCG, Serum (Qualitative)		H. Pylori Screen			
CEA		Preg hCG, Serum (Quantitative)		Hepatitis A Antibody IgM			
Cholesterol		Progesterone		Hepatitis B Surface Antibody			
Cortisol		Prolactin		Hepatitis B Surface Antigen		Phone	
Creatine Kinase (CK)		Protein, Total		Hepatitis B Viral Load			
Creatinine		PSA, Total		Herpes HSV 1 & 2 AB IgG			
Creatinine Clearance 24 HR Urine		PSA, Free		HIV Confirm Antibodies/Antigen			
CRP (C-Reactive Protein)		PT/INR		Infectious Mononucleosis Screen			
CRP, High Sensitivity (hs-CRP)		PTH Intact (Parathyroid Hormone)		Influenza Type A			
D-Dimer		Reticulocyte count		Influenza Type B		Date	
DHEA-S		Rheumatoid Factor (RF)		Measles/Mumps/Rubella			
Drug Screen, Serum		Sodium		Cytomegalovirus (CMV) Viral Load			