

## **PET Imaging of Walnut Creek**

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## PLEASE INCLUDE: ORDERING PHYSICIAN RECENT PROGRESS NOTE, RECENT DIAGNOSTIC IMAGING REPORT (PET, CT, MRI)

loday's Date: Patients Name:	Ordering Physician:
Patients Phone#:	Authorization#:
Patients DOB:	ICD-10 Code:
Insurance:	
Reason for Study:	Reporting Method:  □ STAT REPORT  □ Routine
Oncology:  Routine FDG PET/CT Whole Body FDG PET/CT (to include extremities) FDG Brain PET/CT Routine Ga68 Dotatate PET/CT NetSpot Routine Gu64 Dotatate PET/CT Dectectnet  Neurology: F18 Amyloid Brain PET/CT Amyvid FDG Brain PET/CT	Urology:  Routine F-18 Axumin PET/CT Routine PSMA PET/CT Ga68 Illuccix F-18 Posluma F-18 Pylarify
Copy Report to: Tel: Fax: Mail CD to: Address:	