

WaveImaging™ Imaging Referral Request

TO SCHEDULE: P: (714) 784-1643 P: (562) 299-6230 P: (949) 387-5000 Scheduling Hours:
F: (714) 285-9084 F: (562) 627-0923 F: (949) 753-9030 Mon-Fri 8AM-5:30PM

APPOINTMENT

Time: _____

Date: _____

For authorization support: To initiate the pre-authorization please include clinical notes with this order.

Patient

Name: _____ Date Of Birth: _____

Male Female

Phone: _____ Alternate Phone: _____ Today's Date: _____

(Clinical HX/DX): _____

Call PT. to Schedule Stat Order

Ins. Auth: _____

Lien Work Comp PI

Provider

Name: (Print) _____ Signature: _____

CC: Physician: _____ Address: _____

Phone: _____ Fax: _____ Patient to bring images to Doctor

CT Contrast Studies Only. Labs must be completed within the past 90 days. Labs needed if: _____ Hypertension _____ Age > 80 _____ Diabetes _____ Renal Disease

If Labs have been completed within the past 90 days please provide values and fax lab results: Creatinine / GFR _____ / _____

MRI

With & Without Contrast Without Contrast
 3D Recon

3T 1.5T 1.5W 1.2 Open No preference

Brain: IAC/Trigeminal
 Brain Anti-Amyloid/ARIA Pituitary
 Quantitative Volumetric Imaging (NeuroQuant®, LesionQuant®, IcoBrain), Protocol: _____ Dementia _____ Seizures
_____ MS _____ TBI _____ Peds

Orbits

Spine: Cervical Thoracic Lumbar Sacrum/Coccyx

TMJ

Brachial Plexus: Left Right Bilateral

Sacral Plexus: Left Right Bilateral

Soft Tissue Neck

Abdomen:

Liver Eovist (liver) Kidney Adrenal Glands

MR/RA Renals Pancreas MRCP Enterography

Pelvis: Female Pelvis Prostate

Joint: Left Right Bilateral

Shoulder Elbow Wrist Hip Knee Ankle

MR Arthrogram: (with imaging guidance as needed)

List Body Part: _____ Left Right

MRA:

Brain Neck Chest Thoracic Aorta Abdomen

Abdomen (w/ contrast) Abdominal w/run-off Renal Arteries

MRV: Head Legs/AVF (w/contrast)

Other:

BREAST IMAGING

Screening Mammogram:

Diagnostic Mammogram: Left Right Bilateral

Breast Ultrasound (if indicated): Unilateral Bilateral

Breast Ultrasound: Left Right Bilateral

Breast MRI - Evaluation for Breast CA (w/w/o contrast)

Breast MRI - Evaluation of implant Integrity (w/o contrast)

Date of last mammogram: _____

X-RAY

Extremity: Left Right Bilateral

Weight Bearing Non-Weight Bearing

List Body Part: _____

Sinus: Waters Series

Spine:

Routine AP/LAT Add Flex/Ext Cervical

Scoliosis Study Thoracic Lumbar

Chest: 1 View 2 View Special View

Rib:

Including Chest Left Right Bilateral

Abdomen: 2 View OKUB AAS

Pelvis AP

Other:

To schedule your X-Ray & find the nearest locations with walk-in hours, please visit OCwalkin.com or scan this QR code



CT

w/contrast w/w/o contrast no contrast
 w/ 3D rendering as indicated

Brain Temporal Bones

IAC Middle Ear Mastoids

Orbits Sinus

Maxillofacial - Facial Bones

Neck (Soft Tissue)

Spine: Cervical Thoracic Lumbar

Upper Extremity Joint: Left Right Bilateral

Elbow Wrist Shoulder

Lower Extremity Joint: Left Right Bilateral

Hip Knee Ankle

Extremity (non-joint):

List Body Part: _____ Left Right

Chest: Routine Hi-Res Lung Screen

Coronary Calcium Score

Abdomen: Liver Pancreas Renal Mass Adrenal

Abdomen and Pelvis: Urogram Enterography

Stone Protocol

Pelvis Other:

DEXA

Bone Density Date of last exam: _____

Reason for bone density _____

CTA (ANGIOGRAPHY)

Head Neck Chest: Aorta OPE

Abdomen Pelvis

Extremity: Upper Lower W/runoff

FLUOROSCOPY

Arthrography: Left Right

List Body Part: _____

Myelogram: Cervical Thoracic Lumbar

Esophagram UGI

Small Bowel UGI w/SBFT

Barium Enema/Lower GI (w/air when indicated)

Hysterosalpingogram (HSG) VCUG

Other:

PET/CT

Amyloid Brain

FDG Skull Base to Mid-Thigh

FDG Whole Body (Melanoma)

F-18 PSMA/PyL (Prostate Cancer - Initial Staging/Recurrence)

Ga 68 NetSpot (Neuroendocrine Tumor)

FDG Brain (Metabolic)

18F-FES Cerianna (ER+ Breast Cancer)

F-18 Axumin (Prostate Cancer - Recurrence)

ULTRASOUND

Doppler if indicated
 3D as indicated

Thyroid

Thyroid w/BX: Core FNA w/Afirma

Lymph Node Bx Core FNA

Abdomen: Limited Complete

Area of concern: Liver Gallbladder

Upper Right Quadrant Lower Right Quadrant

Renal: w/Bladder

Bladder (w/pre and post voiding)

Aorta/Retroperitoneal Pelvis (TV if indicated)

Hysterosonogram Scrotum/Testicular

Venous Doppler (Duplex):

Left Right Bilateral Upper Lower

Venous Insufficiency

Carotid Doppler (Duplex)

Arterial Doppler (Duplex): Upper Lower

ABI: Segmental Pressures

Renal Artery (Duplex)

Other:

OB ULTRASOUND

00-14 weeks 14 weeks or greater

OB Ultrasound (TV if indicated)

Limited: Viability Heart Beat Position

Fluid Placental Location

Follow-up - specify documented problem:

Other:

INTERVENTIONAL PROCEDURES

US Guided Thyroid Biopsy Core FNA w/Afirma

Fluoroscopy Guided Hysterosalpingogram (HSG)

NUCLEAR MEDICINE

Parathyroid Scan w/spect

Lymphoscintigraphy Thyroid Uptake Scan

MUGA (Cardiac Blood Pool)

Liver (Hemangioma) Scan

Liver/Spleen: w/vascular flow w/o vascular flow

Gallbladder (HIDA) w/EF w/o EF (Bile leakage)

GI Emptying Scan GI Bleed Scan

Meckels Scan Gallium (lmtd) w/whole body

White Blood Cell (WBC) w sulfur colloid

Bone Scan: 3-Phase Whole Body Limited

SPECT Location:

Renal Scan w/Vascular Flow & Function

Lasix Captopril

Other:

Locations, Maps & General Information

3T = 3T MRI 1.5 = 1.5T MRI O = Open System

				MRI	CT	PET	Nuclear Medicine	X-Ray	Ultrasound	Fluoroscopy	Mammography	DEXA
<input type="checkbox"/>	① Wavelmaging South Beach Anaheim	408 S Beach Blvd #106, Anaheim, CA 92804	714-995-5471	1.5				●	●		●	●
<input type="checkbox"/>	② Wavelmaging Anaheim	947 S Anaheim Blvd, #130, Anaheim, CA 92805	714-758-9800	1.5	●			●	●			
<input type="checkbox"/>	③ Wavelmaging Orange / BL Women's Imaging	230 S Main St, #101, #205, Orange, CA 92868/ BLWI #100	714-288-5400	1.5	●	●	●	●	●	●	●	●
<input type="checkbox"/>	④ Wavelmaging Garden Grove / BL Women's Imaging	9191 Westminster Ave, #105, Garden Grove, CA 92844/ BLWI #210	714-583-6314	1.5	●			●	●		●	●
<input type="checkbox"/>	⑤ Wavelmaging Santa Ana / BL Women's Imaging	1100-A N Tustin Ave, Santa Ana, CA 92705	714-835-6055	1.5	●		●	●	●	●	●	●
<input type="checkbox"/>	⑥ Wave Interventional Radiology & Imaging Center	999 N Tustin Ave #5, Santa Ana, CA 92705	657-232-1572						●			
<input type="checkbox"/>	⑦ Wavelmaging Huntington Beach	17762 Beach Blvd, #110, Huntington Beach, CA 92647	714-898-2991	3T	●			●	●			
<input type="checkbox"/>	⑧ Wavelmaging Fountain Valley	18785 Brookhurst St, #102, Fountain Valley, CA 92708	714-417-9950					●	●			
<input type="checkbox"/>	⑨ Wavelmaging Irvine Barranca	4050 Barranca Pkwy, #160, Irvine, CA 92604	949-726-9500	3T	●	●		●	●			
<input type="checkbox"/>	⑩ Wavelmaging Irvine Sand Canyon	16300 Sand Canyon Ave, #102, Irvine, CA 92618	949-753-0900	1.5								
<input type="checkbox"/>	⑪ Wavelmaging Newport Beach	3300 West Coast Highway, #B, Newport Beach, CA 92663	949-646-4400	3T	●	●		●	●		●	
<input type="checkbox"/>	⑫ Breastlink Women's Imaging Newport Beach	1441 Avocado Ave, #301, Newport Beach, CA 92660	949-272-2095								●	
<input type="checkbox"/>	⑬ Wavelmaging Saddleback	23961 Calle De La Magdalena, #243, Laguna Hills, CA 92653	949-855-4301	1.5	●			●	●			
<input type="checkbox"/>	⑭ Wavelmaging Saddleback Center 2 Now Open	23961 Calle De La Magdalena Ste 130, Laguna Hills, CA 92653	949-855-4301	3T	●	●		●	●			
<input type="checkbox"/>	⑮ Wavelmaging Mission Viejo	26161 Marguerite Pkwy, Suite A, Mission Viejo, CA 92692	949-600-5151	1.5								
<input type="checkbox"/>	⑯ Wavelmaging San Clemente	675 Camino De Los Mares, #101, San Clemente, CA 92673	949-493-8799	1.5	●			●	●			

For exam preparation instructions and more visit WavelmagingNetwork.com

General information

1. It is required that we have a doctor's order to perform your exam.
2. Please bring a valid id card with you along with your insurance card.
3. Some exams require authorization.
4. Please plan on completing registration forms prior to your exam.
5. If possible, dress in loose, comfortable, two-piece clothing. For MRI exams, no belts, or zippers and leave your valuables at home.
6. To expedite your final results to your physician, please bring any prior exam reports/images needed for comparison.
7. Study times may vary.

