Seton Healthcare Family

Radiology Outpatient Ordering Form

Austin Area & Seton Medical Center Williamson (Round Rock)
Phone: (512) 324-1199
FAX: (512) 380-0552

Seton Medical Hays (Kyle)
PHONE: (512) 504-5190
FAX: (512) 380-0552

Seton Highland Lakes
PHONE: (512) 715-3090
FAX: (512) 715-3030

Patient Name :	DOB:	Social Security No.	Patient Phone:
Insurance:	Authorization:	Today's Date:	Today's Time:
Diagnosis/Reason for Exam:		Appointment Date:	Appointment Time:
		ICD 9 Codes:	

Office Phone:	Stat Report Call To:	Phone:	Fax:

SETON LOCATION OF SERVICE

☐University Medical Center Brackenridge ☐Seton Medical Center Austin ☐Seton Southwest Hospital ☐Seton Medical Center Hays
☐Dell Children's Medical Center ☐Seton Northwest Hospital ☐Seton Medical Center Williamson ☐Seton Highland Lakes

Screening maybe Required for IV Contrast Studies – Please select one:
☐I authorize a BUN/Creatinine test to be performed prior to the procedure
☐BUN/Creatinine results _____/_____ (Date Drawn) _____/_____/_____

Patient needs sedation:
☐Minimal sedation
☐Anesthesia consult

A urine pregnancy test maybe required prior to the exam:
☐I authorize a pregnancy test to be performed prior to the procedure.

DIAGNOSTIC RADIOLOGY – NO APPOINTMENT REQUIRED

☐Chest 1V	CPT 71010	☐Abdomen 2V	CPT 74020	☐Pelvis	CPT 72170	☐C Spine 4/5V	CPT 72052	☐Sinuses 3V	CPT 70220
☐Chest 2V	CPT 71020	☐Acute Abdomen	CPT 74022	☐Hip L R	CPT 73510	☐T Spine 3V	CPT 72072	☐Extremity (Specify)	_____
☐Ribs Bilat	CPT 71111	☐KUB 1V	CPT 74000	☐C Spine 3V	CPT 72040	☐L Spine 2/3V	CPT 72100	☐Other (Specify)	_____

APPOINTMENT REQUIRED FOR THE FOLLOWING EXAMS

COMPUTED TOMOGRAPHY (CT)

☐Head/Brain w/o	CPT 70450
☐Head/Brain w	CPT 70460
☐Head/Brain wow	CPT 70470
☐Facial w/o	CPT 70486
☐Facial w	CPT 70487
☐Orbit w	CPT 70481
☐Soft tissue neck w/o	CPT 70490
☐Soft tissue neck w	CPT 70491
☐Sinuses w/o	CPT 70486
☐Sinuses w	CPT 70487
☐Chest w/o	CPT 71250
☐Chest w	CPT 71260
☐C Spine w/o	CPT 72125
☐C Spine w	CPT 72126
☐T Spine w/o	CPT 72128
☐T Spine w	CPT 72129
☐L Spine w/o	CPT 72131
☐L Spine w	CPT 72132
☐Abdomen w/o	CPT 74150
☐Abdomen w	CPT 74160
☐Abdomen wow	CPT 74170
☐Pelvis w/o	CPT 72192
☐Pelvis w	CPT 72193
☐ABD &Pelvis wo	CPT 74176
☐ABD & Pelvis w	CPT 74177
☐ABD & Pelvis wow	CPT 74178
☐Calcium Scoring	CPT 75571
☐Other (Specify)	_____
☐Biopsy of:	_____

CTA:

☐Head	CPT 70496
☐Neck	CPT 70498
☐Chest	CPT 71275
☐Heart- (coronary arteries)	CPT 75574
☐Abdomen	CPT 74175
☐Pelvis	CPT 72191
☐ Abdomen & Pelvis	CPT 74174
☐Extremity:	_____
☐Other:	_____

MRI

☐Brain w/o	CPT 70551
☐Brain wow	CPT 70553
☐Brain spectroscopy	CPT 76390
☐Internal auditory Canal	CPT 70553
☐Limited stereotactic brain w	CPT 7055252
☐Sella/Pituitary wow	CPT 70553
☐Orbits/face wow	CPT 70543
☐Orbits /face w/o	CPT 70540
☐Cervical w/o	CPT 72141
☐Cervical wow	CPT 72156
☐Thoracic w/o	CPT 72146
☐Thoracic wow	CPT 72157
☐Lumbar w/o	CPT 72148
☐Lumbar wow	CPT 72158
☐Soft Tissue Neck w/o	CPT 70540
☐Soft Tissue Neck wow	CPT 70543
☐Chest w/o	CPT 71550
☐Chest wow	CPT 71552
☐Abdomen w/o	CPT 74181
☐Abdomen wow	CPT 74183
☐Pelvis w/o	CPT 72195
☐Pelvis wow	CPT 72197
☐Extremity	
☐LT ☐ RT ☐wow ☐ w/o	
☐ Other (specify)	_____

MRA:

☐Head w/o	CPT 70544
☐Head w	CPT 70545
☐Neck wow	CPT 70549
☐Chest	CPT 71555/C8911
☐Abdomen	CPT 74185/C8902
☐Other (specify):	_____

MYELOGRAM w/CT to follow

☐Cervical	CPT 72240 & 72126
☐Thoracic	CPT 72255 & 72129
☐Lumbar	CPT 72265 & 72132
☐Complete	CPT (72270, 72126, 72129,72132)

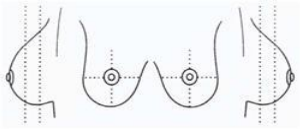
NUCLEAR MEDICINE

☐Bone scan limited	CPT 78300
☐Bone scan 3 phase	CPT 78315
☐Bone scan spect	CPT 78320
☐Bone scan whole body	CPT 78306
☐HIDA scan 78226 ☐ W/CCK	CPT 78227
Gallium scan (for tumor):	
☐Gallium multiple area	CPT 78801
☐Gallium whole body	CPT 78802
☐Gallium spect	CPT 78803
☐WBC –Whole body	CPT 78806
☐MUGA scan (rest only)	CPT 78472
☐Renal scan w/Lasix	CPT 78708
☐Renal scan w/Captopril	CPT 78708
☐Lung scan Perfusion only	CPT 78580
☐Lung scan Vent/Perf	CPT 78582
☐Thyroid scan	CPT 78013
☐Thyroid uptake	CPT 78012
☐Parathyroid scan	CPT 78070
☐ Parathyroid scan w/ SPECT	CPT 78071
☐Thyroid whole body I-123	CPT 78018
☐ Liver/Spleen scan	CPT 78215
☐ Liver scan SPECT	CPT 78205
☐Cardiac multi rest/stress	CPT 78452
☐ w/exercise ☐ w/Lexi ☐ w/Dobutamine	
☐Thyroid cancer therapy	CPT 79005
☐ Octreotide scan	CPT 78803
☐ Other (specify):	_____

MAMMOGRAPHY

☐ Screening only Bilateral	CPT G0202/77052
☐ Diagnostic Bilateral	CPT G0204/77051
☐ Diagnostic Unilateral	CPT G0206/77051
w/ US if abnormal or suspicious	CPT 76645

(symptoms– please mark area of concern)



☐ Stereotactic Breast Biopsy	
☐Bone Density	CPT 77080
☐Other (specify):	_____

ULTRASOUND

☐Head/Neck Soft Tissue	CPT 76536
☐Thyroid	CPT 76536
☐Breast ☐ LT ☐ RT	CPT 76645
☐Chest	CPT 76604
☐ Abdomen complete	CPT 76700
☐Renal(Kidneys/Bladder)	CPT 76770
☐Abdomen limited	CPT 76705
☐Retroperitoneal (aorta,IVC,nodes)	CPT 76770
☐ Testicular	CPT 76870
☐Pelvis(Doppler maybe needed to evaluate blood flow)	CPT 76856
☐Transvaginal-Non-OB	CPT 76830
☐Doppler	CPT 93976
☐OB≤14wks.1st trimester	CPT 76801
☐OB≥14wks.2 or 3 trimester	CPT 76805
☐ Transvaginal OB	CPT 76817
☐Carotid Doppler bilateral	CPT 93880
☐Venous Doppler	
☐LT ☐RT☐ARM	CPT 93970
☐LT ☐RT☐LEG	CPT 93971
☐Arterial Doppler	
☐LT ☐RT☐ARM	
☐LT ☐RT☐LEG	
☐Biopsy of Breast ☐LT☐RT	CPT 76942
☐Guided Biopsy of:	_____
☐Other:	_____

FLUOROSCOPY

☐Barium Swallow	CPT 74230
☐ w/speech	CPT 92611
☐Upper GI	CPT 74241
☐Small Bowel	CPT 74250
☐IVP	CPT 74400
☐Esophagram	CPT 74220
☐Colon	CPT 74270
☐ w/air	CPT 74280
☐Hystersalpingogram	CPT 74740
☐VCUG	CPT 74455
☐Lumbar Puncture w/flouro	
☐ w/pressures	
☐ Other (specify)	_____

Authorized Practitioner (print):	Authorized Practitioner Signature (Required; no signature stamps accepted):	Notes:

SETON LOCATION OF SERVICE

1 UNIVERSITY MEDICAL CENTER BRACKENRIDGE
X-ray • CT • *Mammography • MRI*
Ultrasound • Nuclear Medicine
Fluoroscopy • Bone Densitometry
Special Procedures
601 E. 15th Street
Austin, Texas 78701
512-324-7190

2 DELL CHILDREN'S MEDICAL CENTER
X-ray • CT • *Fluoroscopy • MRI*
Ultrasound • Nuclear Medicine
Special Procedures
4900 Mueller Blvd.
Austin, Texas 78723
512-324-0140

3 SETON MEDICAL CENTER AUSTIN
X-ray • CT • *Mammography (Needle localization only)• MRI • Ultrasound • Nuclear Medicine*
Fluoroscopy • Special Procedures
1201 W. 38th St.
Austin, Texas 78705
512-324-1006

4 SETON MEDICAL CENTER HAYS
X-ray • CT • Mammography • MRI
Ultrasound • Nuclear Medicine
Fluoroscopy • Special Procedures
Bone Densitometry
6001 Kyle Parkway
Kyle, Texas 78640
512-324-5148

5 SETON NORTHWEST HOSPITAL
X-ray • CT • *Mammography Ultrasound •*
Nuclear Medicine Fluoroscopy • Stereotactic
Breast Biopsy MRI (large bore)
11113 Research Blvd.
Austin, Texas 78759
512-324-6190

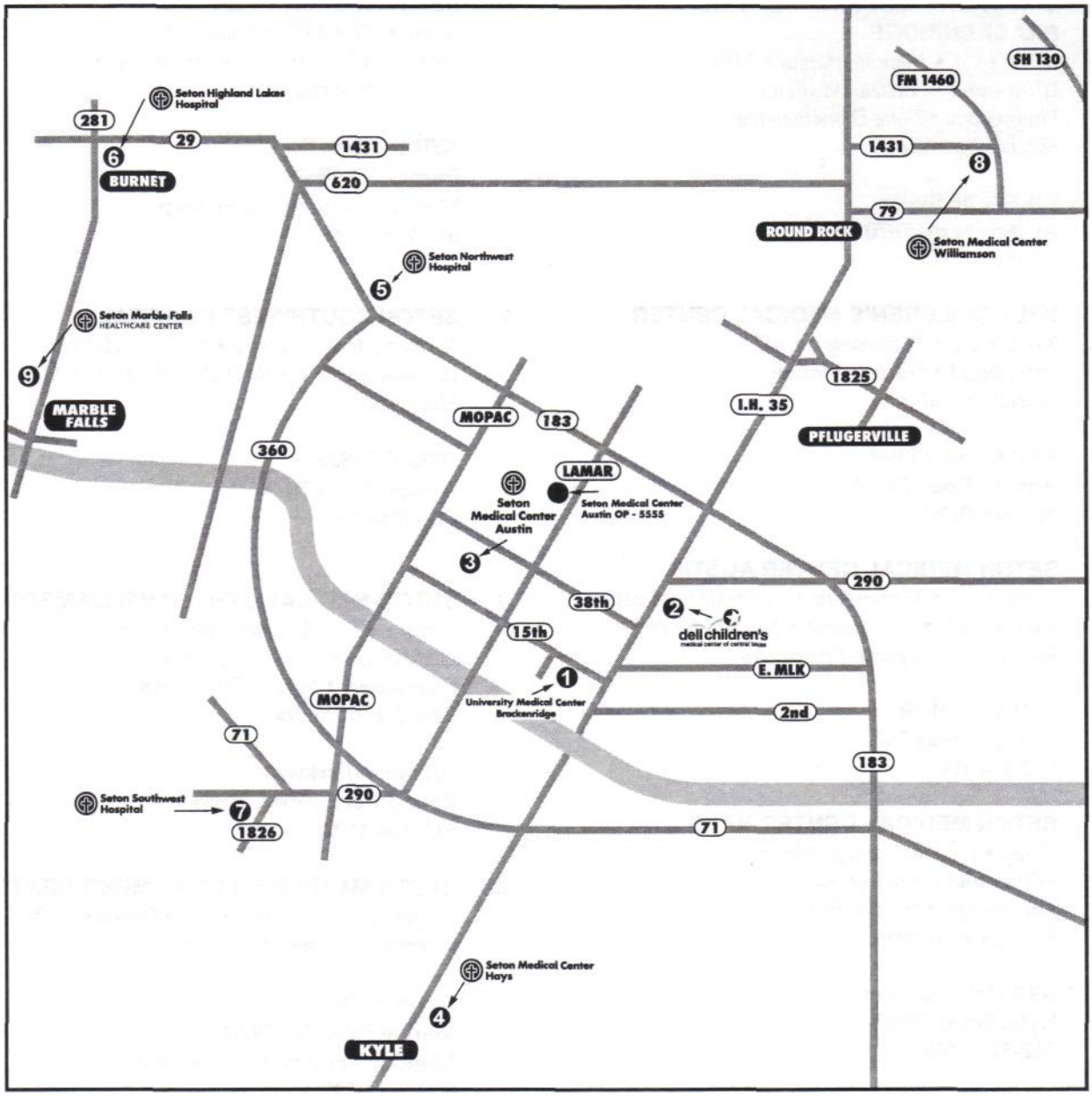
6 SETON HIGHLAND LAKES
X-ray • CT • MRI • Fluoroscopy
Ultrasound
Doppler/Echocardiography Nuclear Medicine
3201*S.* Water St
Burnet, TX 78611
Monday - Friday, 8 a.m. - 6 p.m.
512-715-3090

7 SETON SOUTHWEST HOSPITAL
X-ray • Mammography • Nuclear Medicine
Ultrasound • CT • Bone Densitometry • MRI
Fluoroscopy
7900 FM1826
Austin, Texas
78737 512-324-
9021

8 SETON MEDICAL CENTER WILLIAMSON
X-ray • CT • Mammography•MRI
Ultrasound • Nuclear Medicine
Fluoroscopy • Special Procedures
Bone Densitometry
201 Seton Parkway
Round Rock, Texas
78665 512-324-4192

9 SETON MARBLE FALLS WOMEN'S CENTER
Digital Mammography • Bone
Densitometry •Stereotactic Biopsy
Ultrasound
700 Hwy 281
Marble Falls, TX 78654
Monday - Friday, 8 a.m. - 4 p.m.
830-693-8733

MAP OF Locations



1 **UNIVERSITY MEDICAL CENTER BRACKENRIDGE**
(512)324-7190

2 **DELL CHILDREN'S MEDICAL CENTER**
(512)324-0140

3 **SETON MEDICAL CENTER AUSTIN**
(512)324-1006

4 **SETON MEDICAL CENTER HAYS**
(512)324-5148

5 **SETON NORTHWEST HOSPITAL**
(512)324-6190

6 **SETON HIGHLAND LAKES**
(512)715-3090

7 **SETON SOUTHWEST HOSPITAL**
(512)324-9021

8 **SETON MEDICAL CENTER WILLIAMSON**
(512)324-4192

9 **SETON MARBLE FALLS WOMEN'S CENTER**
(830) 693-8733