Mammography, Echo, US and X-Ray Imaging Requisition
Phone: (406) 751-9729
Fax: (406) 751-6752

LOGAN HEALTH

***Required Field** | Please use black or dark blue ink. Do not use highlighters, red ink or gel pens. |

Name:	**DOB:**	**Gender: M/F**	**Home Phone:**
Referring Physician Signature: **Printed Name:**	**NPI:**		**Insurance:**
Date:	**ICD-10 Code:**		**Allergies:**

IF YOU DO NOT SEE A DESCRIPTION FOR THE EXAM YOU REQUIRE, PLEASE WRITE IT IN THE SECTION BELOW THE APPROPRIATE DEPARTMENT

Breast Ultrasound Studies:				**X-Ray Studies (Routine):**		**X-Ray Studies (Specialty):**	
US Breast Aspiration – L | R 19000		US Chest B Scan 76604		XR Abdomen Complete 74022		XR Barium Enema (Water Soluble) 74270	
US Breast Axilla – BI | L | R 76641 (Complete); 76642 (LTD)		US Duplex Dopp Venous Insuff –- BI | L | R 93971		XR Abdomen, 1 View (KUB) 74018		XR Cystogram Outpatient 74430	
US Breast Biopsy – BI | L | R 19083		US Follicular 76857		XR Bone Age 77072		XR Esophagus Study 74220	
US Breast Diagnostic – BI | L | R 76641 (Complete); 76642 (LTD)		US Gender Check 76811		XR Bone Survey 77075		XR Esophagram/Speech Video 74230	
US Breast Device Loc – L | R 19285; (19083?)		US Head/Brain 76536		XR Chest, PA and Lateral 71046		XR Hysterosalpingogram (HSG) 74740	
US Breast Lymph Node Biopsy – L | R 19083		US Head/Neck Soft Tissue 76536		XR Clavicle 73000		XR Loopogram 50690; 74425	
DEXA Studies:		US Hip Infant W/ Manipulation 76885		XR Cystogram 74430		XR Lumbar Puncture 72100	
MM DEXA Bone Density Axial 77080		US Hemodialysis Access 93990		XR Femur 73552		XR Retrograde Urethrocystography 51610; 74450	
MM DEXA Axial Skeleton Pediatric 77080		US Lower Extremity Arterial – BI | L | R 93926		XR Mandible 70110		XR Small Bowel 74250	
Mammography Studies:		US Upper Extremity Arterial – BI | L | R 93931		XR Pelvis Inlet/Outlet 72190		XR Upper GI 74240	
MM Breast Device Loc – L | R 19281		US Lower Extremity LTD – BI | L | R 76882		XR Pelvis Judet Views 76499		XR Upper GI Air Contrast W/O KUB 74246	
MM Stereotactic Breast Biopsy – L | R 19081		US Lower Extremity Venous – L | R 93971		XR Pelvis Limited (AP) 71100		XR Upper GI Air Contrast w/SBFT 74249	
MM Tomo Diagnostic w/ Contrast – BI | L | R 77066 + G0279		US OB Breech Version 59412		XR Ribs – L | R 71110		XR Voiding Cystogram 51600; 74454	
MM Tomo Diagnostic Mamm – BI | L | R 77061		US OB Less Than 14 Weeks 76801		XR Scoliosis Study 72090			
MM Tomo Diagnostic Mamm w/Imp – BI | L | R 77061		US OB Twin Less Than 14 Weeks 76802		XR Sinus 1 View 70210			
MM Tomo Screening – BI | L | R 77067		US Pelvis Complete 76856		XR Sinus Complete 70220			
MM Tomo Screening w/Imp – BI | L | R 77063		US Pelvis Complete w/Transvaginal 76830		XR Skull Complete 70260			
Echo Studies:		US Pelvis Limited 76857		XR Skull Limited 70250			
ECHO Cardiac US Complete W/O 93307		US Prostate Marker 55876		XR Spine Cervical 1 View 72020			
ECHO TTE with Bubble 93306		US Renal W/ Doppler 76770; 93975		XR Spine Cervical Complete (AP/Lateral/Oblique) 72052			
ECHO Cardiac US Congenital Complete 93303		US Renal W/O Doppler 76770		XR Spine Cervical Flex/Ext (3V) 72040			
ECHO Cardiac US Congenital Limited 93304		US Segmental Pressures 93923		XR Spine Cervical Limited (AP, Lateral, Odontoid) 72050			
ECHO Cardiac US Fetal Complete 76825		US Segmental Pressures W/ Stress 93924		XR Spine Lumbar 1 View 72100			
ECHO Cardiac US Limited W/O 93307		US SMA Study 93975		XR Spine Lumbar Complete (AP, Lateral, Oblique) 72110			
ECHO Cardiac US Limited W/ 93308		US Spinal Canal 76800		XR Spine Lumbar Flex/Ext (3V) 72114			
ECHO Cardiac US Complete W/ 93306		US Testicle 76870		XR Spine Lumbar Limited (AP, Lateral, L5-S1) 72100			
ECHO Stress w/Dobutamine 93351		US Thyroid/Neck 76536		XR Thoracic 1 View 72070			
ECHO Stress Echo 93350		US Upper Extremity LTD – BI | L | R 76882		XR Thoracic Complete 72072			
ECHO Stress w/Contrast 93352		US Upper Extremity Venous – BI | L | R 93971		XR Spine Thoraco-Lumbar (2V) 72082			
Ultrasound Studies:		US Vein Mapping 93970		**XR Upper Extremity:**			
US AAA Screening 76706		US Venous Ablation Follow Up 93971		XR Elbow – L | R 73080			
US Abdomen Complete 76700		**XR Lower Extremity:**		XR Finger (Specify): 73140			
US Abdominal Limited 76705		XR Ankle – L | R 73610		XR Forearm – L | R 73090			
US Abdomen/Pelvic 76700		XR Foot – L | R 73630		XR Hand – L | R 73120			
US ABI 93922		XR Heel – L | R 73650		XR Humerus – L | R 73060			
US ABI w/Stress 93924		XR Hip – L | R 73502		XR Shoulder – L | R 73030			
US Abdomen Complete w/Doppler 93975		XR Knee – L | R 73564		XR Wrist – L | R 73110			
US Abdomen Limited w/Doppler 93976		XR Tibia/Fibula – L | R 73590					
US Amniotic Fluid Index 76815		XR Toe (Specify): 73660					
US Amniocentesis 76946		**XR Myelogram Studies:**					
US Aorta 76706		XR Spine Cervical Myelogram 72240					
US Carotid 93880		XR Spine Lumbar Myelogram 72265					
		XR Spine Thoracic Myelogram 72255					

Special Instructions:

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