

* coming March 2017



PROGRESSIVE RADIOLOGY WESTMINSTER
 Phyllis Green Professional Center • 826 Washington Road, Suite 112, Westminster, MD 21157
 Phone 410-386-0835 Fax 410-386-0840

1.5T OVAL MRI - DIGITAL XRAY

Patient Name:		Appointment Date/Time:	
Referring Physician's Name:		Physician's Signature:	
Office Telephone Number:		Fax Number:	

CLINICAL HISTORY
 (Symptoms, Diagnosis or Comments, ICD-10 Codes)

SPECIAL INSTRUCTIONS

Call physician with stat reading Provider's Phone: _____

Other: _____ Send an additional copy of the report to: _____

MAGNETIC RESONANCE IMAGING

Orbital X Ray to clear metal Contrast at Radiologist Discretion With and Without Contrast

NEURO	BODY	MUSCULOSKELETAL	* DIGITAL X-RAY
<input type="checkbox"/> BRAIN <input type="checkbox"/> IAC's <input type="checkbox"/> MS <input type="checkbox"/> ORBITS <input type="checkbox"/> PITUITARY <input type="checkbox"/> TEMPORAL LOBES / SEIZURES <input type="checkbox"/> MRAs <input type="checkbox"/> CIRCLE OF WILLIS/CEREBRAL <input type="checkbox"/> NECK/CAROTIDS <input type="checkbox"/> OTHER _____ <hr/> <input type="checkbox"/> SOFT TISSUE NECK <input type="checkbox"/> TMJ <input type="checkbox"/> CERVICAL SPINE <input type="checkbox"/> THORACIC SPINE <input type="checkbox"/> LUMBAR SPINE <input type="checkbox"/> BRACHIAL PLEXUS	<input type="checkbox"/> ABDOMEN <input type="checkbox"/> GENERAL <input type="checkbox"/> ADRENALS <input type="checkbox"/> KIDNEY <input type="checkbox"/> LIVER <input type="checkbox"/> PANCREAS <input type="checkbox"/> MRCP <input type="checkbox"/> CHEST (<i>Specify</i>) <input type="checkbox"/> RENAL ARTERIES <input type="checkbox"/> MRA <input type="checkbox"/> AORTA <input type="checkbox"/> OTHER _____ <input type="checkbox"/> PELVIS (<i>Specify</i>) <hr/> <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE <input type="checkbox"/> BONY	<input type="checkbox"/> ANKLE <small>(HINDFOOT)</small> <input type="checkbox"/> ELBOW <input type="checkbox"/> FOOT <input type="checkbox"/> FOREFOOT <input type="checkbox"/> MIDFOOT <input type="checkbox"/> HAND <input type="checkbox"/> FINGER/ THUMB <input type="checkbox"/> HIP <input type="checkbox"/> KNEE <input type="checkbox"/> SHOULDER <input type="checkbox"/> WRIST <input type="checkbox"/> OTHER: INTERVENTIONAL MSK PROCEDURE (<i>Specify</i>) <hr/> <input type="checkbox"/> ATHLETIC PUBALGIA/ SPORTS HERNIA <input type="checkbox"/> SACROILIAC JOINTS <input type="checkbox"/> CHRONIC EXERTION SYNDROME	<input type="checkbox"/> ABD SERIES <input type="checkbox"/> ABDOMEN FLEXION /EXT <input type="checkbox"/> CHEST <input type="checkbox"/> CERVICAL SPINE <input type="checkbox"/> KUB <input type="checkbox"/> LUMBAR SPINE <input type="checkbox"/> ORBITAL XRAY <input type="checkbox"/> PELVIS <input type="checkbox"/> SCOLIOSIS <input type="checkbox"/> THORACIC SPINE <input type="checkbox"/> ADENOID <input type="checkbox"/> L <input type="checkbox"/> R <input type="checkbox"/> ANKLE <input type="checkbox"/> L <input type="checkbox"/> R <input type="checkbox"/> FOOT <input type="checkbox"/> L <input type="checkbox"/> R <input type="checkbox"/> HAND <input type="checkbox"/> L <input type="checkbox"/> R <input type="checkbox"/> HIP <input type="checkbox"/> L <input type="checkbox"/> R <input type="checkbox"/> KNEES <input type="checkbox"/> L <input type="checkbox"/> R <input type="checkbox"/> SHOULDER <input type="checkbox"/> L <input type="checkbox"/> R <input type="checkbox"/> WRIST <input type="checkbox"/> L <input type="checkbox"/> R

Rev 1/2017

• Most Health Insurances Accepted • Self Pay Policy
• Same Day Appointments • Pre-Authorizations

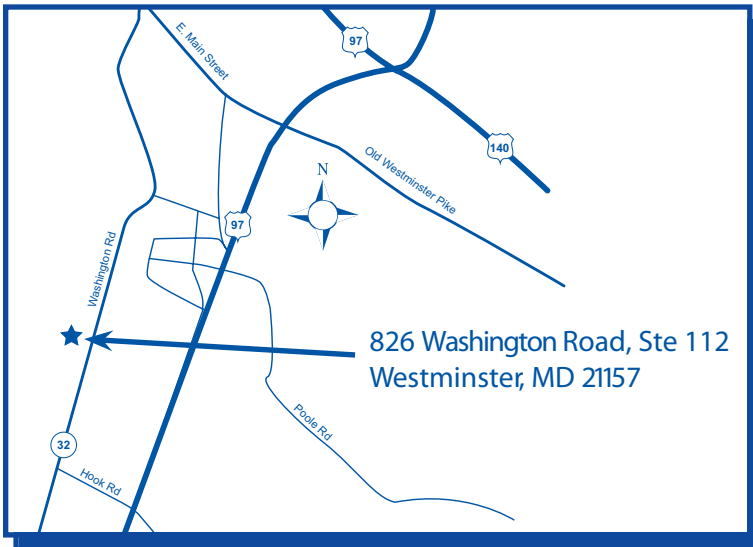


www.progressiveradiology.com

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Directions:



From South and West - Frederick:

From US 70 E take Exit 76 to 97 N. Continue North and make a left onto Hook Road. Turn right onto Washington Road. Facility located on left.

From East - Baltimore:

Beltway 695 to US 795 W. Turn onto US 140 toward Westminster. Turn left on US 97 S (Malcolm Drive). Take a slight right onto Old Westminster Pike. Turn left onto Washington Road. Facility located one mile on right.

From Northwest - Gettysburg, PA:

US 97 toward Westminster. At the end of 97 take a left turn onto Main Street. Turn right onto Washington Road. Facility located one mile on right.

From North - Hanover, PA:

US 94 S in PA becomes MD 30. Right onto US 27 S then exit to US 140 E. Turn right onto 97 S (Malcolm Drive). Turn right onto Hook Road. Turn right onto Washington Road. Facility located on left.

Progressive Radiology Additional Locations:

Aberdeen, MD **XRy**

988 Hospitality Way
Suite A
Aberdeen, MD 21001
Phone: 443-502-6651
Fax: 443-502-6652

Bel Air, MD (Colonnade) **3T MRI**

XRy
3D Mammography
Ultrasound • CT
Bone Density
100 Fulford Avenue
Bel Air, MD 21014
Phone: 410-838-6767
Fax: 410-838-7895

Berlin, MD **High Field MRI**

314 Franklin Avenue
Suite 406
Berlin, MD 21811
Phone: 410-641-9560
Fax: 410-641-4662

Germantown, MD **3T MRI**

CT
20410 Observation Drive
Suite 106
Germantown, MD 20876
Phone: 240-397-6674
Fax: 240-397-6676

Greenbelt, MD **3T Wide Bore MRI**

7701 Greenbelt Drive
Suite 102
Greenbelt, MD 20770
Phone: 301-464-6400
Fax: 301-464-6404

Hagerstown, MD **3T Wide Bore Open MRI** **High Field Open MRI** **CT • Ultrasound • XRy**

1185 Imperial Drive
Suite 100
Hagerstown, MD 21740
Phone: 301-733-1477
Fax: 301-733-7758

Hagerstown, MD **Mammography**

1165 Imperial Drive
Suite 101
Hagerstown, MD 21740
Phone: 240-513-6800
Fax: 240-513-6801

Olney, MD **3T Wide Bore MRI**

3300 Olney-Sandy Spring Road
Suite 100
Olney, MD 20832
Phone: 301-260-2971
Fax: 301-260-7971

Salisbury, MD **High Field MRI • CT**

1820 Sweetbay Drive Suite 102
Salisbury, MD 21804
Phone: 410-546-3390
Fax: 410-546-6136

Salisbury, MD **OPEN MRI**

106 Milford Street Suite 602
Salisbury, MD 21804
Phone: 410-546-4300
Fax: 410-846-1810

Silver Spring, MD **OPEN MRI**

1010 Wayne Avenue
Suite 151
Silver Spring, MD 20910
Phone: 301-495-4674
Fax: 301-495-5575

Washington, D.C. Foxhall **3T Wide Bore MRI**

1.5T Extremity MRI
Ultrasound
3301 New Mexico Ave, NW
Suite 132
Washington, D.C. 20016
Phone: 202-966-0606
Fax: 202-244-6757