



**SUGAR LAND**

17320 West Grand Parkway South  
Suite A ■ Sugar Land, Texas 77479  
**(832) 595-2713 ■ Fax (832) 595-2714**  
NPI# 1366495244 ■ Tax ID# 34-1994841

**THE WOODLANDS**

College Park Plaza ■ 3091 College Park Drive  
Suite 340 ■ The Woodlands, Texas 77384  
**(936) 271-4060 ■ Fax (936) 271-4063**  
NPI# 1568415529 ■ Tax ID# 33-1051345

**ONCOLOGICS**

525 North Lewis Street  
New Iberia, LA 70563  
**(337) 364-1131 ■ Fax (337) 367-5750**  
NPI# 1720489362 ■ Tax ID# 471752607

**TULSA**

6711 South Yale ■ Suite 104  
Tulsa, Oklahoma 74136  
**(918) 523-7200 ■ Fax (918) 523-7201**  
NPI# 1669425187 ■ Tax ID# 47-0901744

**NORTHERN COLORADO**

1915 Wilmington Drive ■ Suite 101  
Fort Collins, Colorado 80528  
**(970) 204-0202 ■ Fax (970) 204-0208**  
NPI# 1679526800 ■ Tax ID# 161709679

**DALLAS-NORTHEAST**

1250 Northwest Highway, Ste. R.  
Garland, Texas 75041  
**(972) 279-5172 ■ Fax (972) 279-6948**  
NPI# 1619922184 ■ Tax ID# 04-3793908

**PET/CT SCAN REQUEST FORM**

Patient Name:		DOB: / /	
Home:	Work:	Mobile:	
ICD Code:		Patient Email:	
Ordering Physician:		Phone:	Fax:
Physician Address:			
Insurance Provider:	Policy #:	Group #:	
Follow-up Appointment Date:			

**Please provide patient demographics, insurance card(s), clinical notes, labs, imaging and pathology reports with the order.**

Please note that the CT in PET/CT is non-diagnostic. It is for attenuation correction only.

**PET/CT EXAM REQUESTED – CHOOSE RADIOTRACER AND BODY AREA\***

(\*only available in certain markets)

- |  |  |
|--|--|
| <input type="checkbox"/> F-18 FDG – for most cancers and neurologic diseases; exceptions below | <input type="checkbox"/> 78815 – head to mid thighs                                |
| <input type="checkbox"/> F-18 Fluoroestradiol (*Cerianna) – for ER+ metastatic breast cancer   | <input type="checkbox"/> 78816 – scalp to toes, used for melanoma/multiple myeloma |
|  | <input type="checkbox"/> 78608 – primary brain tumor/dementia/seizure              |

**PROSTATE IMAGING**

- |  |   |
|--|---|
| <input type="checkbox"/> F-18 Fluciclovine (Axumin) – prostate cancer restaging                        | <input type="checkbox"/> 78815 – head to mid thighs |
| <input type="checkbox"/> PSMA – prostate cancer staging/restaging (Indicate tracer if preferred) _____ |   |

**NEUROENDOCRINE TUMOR IMAGING**

- |   |   |
|---|---|
| <input type="checkbox"/> Ga-68 Dotatate (NetSpot)   | <input type="checkbox"/> 78815 – head to mid thighs |
| <input type="checkbox"/> Cu-64 Dotatate (Detectnet) |   |

**ALZHEIMER'S/DEMENTIA IMAGING**

- |  |   |
|--|---|
| <input type="checkbox"/> F-18 Flortaucipir (*TAUVID)                         | <input type="checkbox"/> 78814 – brain, limited PET |
| <input type="checkbox"/> Amyloid PET/CT (Indicate tracer if preferred) _____ |   |

**REASON FOR ORDERING A PET/CT SCAN:**

<input type="checkbox"/> Diagnosis	<input type="checkbox"/> Staging (pathology complete/pre-treatment)
<input type="checkbox"/> Restaging (post-treatment) <i>RE-STAGING: Using PET/CT after an entire course of therapy is completed to see if the treatment worked or if there is persistent disease. Re-staging should be used when a physician is trying to identify a recurrence.</i>	<input type="checkbox"/> Treatment Monitoring/Treatment Assessment <i>TREATMENT ASSESSMENT: Using PET/CT to scan a patient during a planned course of chemotherapy or radiation therapy to see if the therapy is working and determine if the patient should continue on the same course of therapy.</i>
	<input type="checkbox"/> Radiation Therapy Treatment Planning

**QUESTIONS:**

Is patient currently undergoing a planned course of therapy?  Y  N  Chemotherapy  Radiation Therapy

When is the patient's next treatment? \_\_\_\_\_  N/A

Has the patient had a previous PET/CT scan?  Y  N \_\_\_\_\_

**What question(s) do you want the PET/CT scan to answer?** \_\_\_\_\_

Ordering Physician Signature (or authorized signor)

Date