



Texarkana PET/CT Imaging
Institute, LP

1929 MOORES LANE • TEXARKANA, TX 75503

TAX I.D. 72-1513569

PH: 903-794-1994 • FAX: 903-794-1996

PET/CT PRESCRIPTION

Date: _____

Thank you for referring your patient for a PET/CT scan. In order to expedite the approval and scheduling process, please provide the following information about your patient.

Patient Name: _____ DOB: _____

Home Phone: (____) _____ Work Phone: (____) _____ SSN: _____

Gender: M F Height: _____ Weight: _____ lbs. Diabetic: Yes _____ No _____

Referring Physician: _____

Office Phone: (____) _____ Fax: (____) _____

Reason for Scan: _____

Diagnosis Code: _____

Primary Insurance is: _____

Patient's return office visit date: _____

Please fax the following items to the PET/CT Institute at (903) 794-1996.

- ★ Completed Prescription form
- ★ Recent history and physical
- ★ All recent imaging study reports, CT, MRI, Ultrasound & Nuclear Medicine
- ★ Lab values for tumor markers (CEA, CA-125 etc.)
- ★ Photo copy of front and back of insurance card(s)

Procedure Requested for above patient:

- [] **Whole Body Tumor Localization / FDG**
 - ★ Normal parameters for the scan are canthomeatal line to mid-thigh
- [] **Brain / FDG**
- [] **Brain / Neuraceq (Florbetaben F18)**
- [] **F-18 Axumin Scan**
- [] **F-18 PSMA Pylarify Scan**
- [] **Whole Body for Melanoma / Myeloma**
 - ★ Normal parameters for this scan are vertex through feet

Physician Signature: _____

Instructions to follow before your PET/CT Scan:

Meals:

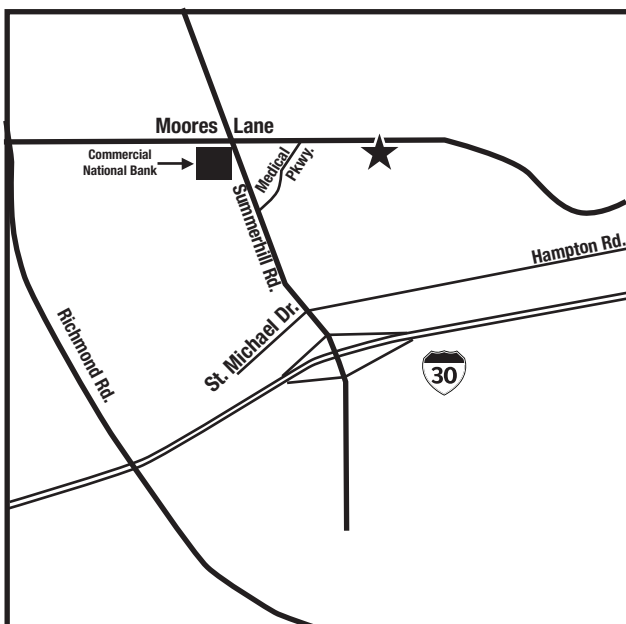
Supper/Dinner (the night before the exam): Grilled meat or eggs and green veggies. Water, diet soda, or unsweet tea

Breakfast (must be at least 6 hours prior to exam): Bacon/sausage & eggs. Water and 1 cup of black coffee (no sugar, sweetener, or creamer).

(Foods to avoid for both meals: *All dairy [except for butter and cheese], refined sugar, all fruits, raisins, beets, carrots, corn, kidney beans, peas, yams, cereal [hot or cold], rice cakes, all breads, muffins, tortillas, potatoes, pretzels, chips, rice, granola, oatmeal, pasta, alcohol, sodas and fruit juices.*)

Reminders:

1. No food for 6 hours prior to exam.
2. Within 6 hours prior to exam, hydrate with water only. Drink lots of water.
3. Absolutely **NO SUGAR** the night before or the morning of the exam. This includes gum, mints, cough drops, or any foods that may contain sugar.
4. Patient may take medication as usual except diabetes medications and vitamins. PET Center will give instructions.
5. No exercise or strenuous work within 24 hours of your exam.
6. Expect to be at the center for about 1-1/2-2 hours.
7. Bring insurance cards and drivers license with you.
8. Due to the nature of the medication used, family members (especially pregnant women and children) are not allowed in the uptake rooms.
9. If you are on anxiety medication, bring the medication with you in order to take it while in the uptake room.
10. Wear clothing without metal. No underwire bras. No jewelry.
11. Non-ambulatory nursing home patients must have nurse/caregiver with them to help with transfers/ restroom etc.
12. Our waiting room has limited space. No more than two family members/caregivers per patient in the waiting room.



If you have questions please call

**Texarkana PET/CT Imaging at
(903) 794-1994**

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1929 MOORES LANE
TEXARKANA, TX 75503

Your Appointment:

Date: _____

Time: _____