

Open Upright MRI

OF MISSOURI

An affiliate of Center for Diagnostic Imaging and St. Luke's Hospital

11737 Olive Blvd.
 Creve Coeur, MO 63141
 P: 314.291.6736 (OPEN)
 F: 314.991.1778
 Open Upright MRI, X-ray
 Tax ID: 43-0652680

Appointment date and time		Patient DOB
Patient name (as shown on insurance card)	Primary phone #	Secondary phone #
Insurance information	<input type="radio"/> Workers' comp <input type="radio"/> Auto	Date of injury
REQUIRED) Written diagnosis/reason/symptom for exam(s). Must include specific clinical indications (such as location, context and severity) to support medical necessity for each test. Condition: <input type="radio"/> Acute or <input type="radio"/> Chronic Is the exam/procedure related to an injury? <input type="radio"/> No <input type="radio"/> Yes If yes <input type="radio"/> Initial <input type="radio"/> Subsequent or <input type="radio"/> Sequela		Clinical Decision Support (CDS)
		Required for Medicare Part B
		Modifier (determination) G-code (vendor)
REPORTING METHOD: <input type="radio"/> CD w/report <input type="radio"/> PT to carry CD <input type="radio"/> STAT <input type="radio"/> Report only <input type="radio"/> Portal/Web viewing <input type="radio"/> Read and call		Report to (fax/phone/address):

Without contrast With contrast With/Without contrast
 IV contrast as clinically indicated by radiologist

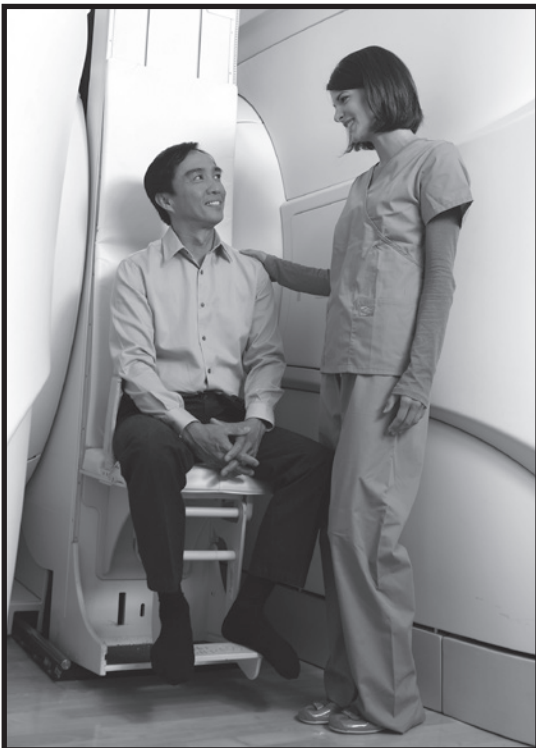
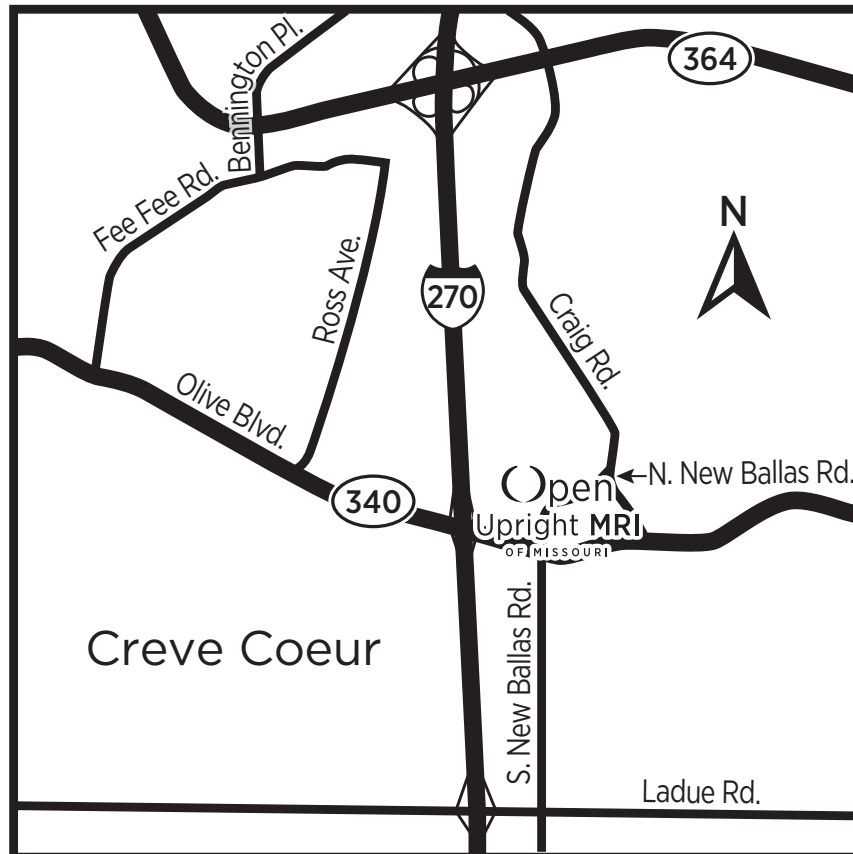
On-site creatinine testing needed? Creatinine _____ Blood draw date _____

MRI	POSITIONAL IMAGING
NEURO Spine <input type="radio"/> Cervical <input type="radio"/> Thoracic <input type="radio"/> Lumbar <input type="radio"/> Brain and/or <input type="radio"/> Orbits <input type="radio"/> IACs <input type="radio"/> Pituitary <input type="radio"/> Neck (soft tissue) <input type="radio"/> TMJ	<input type="radio"/> Flexion <input type="radio"/> Extension <input type="radio"/> Standing <input type="radio"/> Recumbent <input type="radio"/> Other _____
MSK <input type="radio"/> Extremity _____ <input type="radio"/> L <input type="radio"/> R <input type="radio"/> BIL <input type="radio"/> Joint _____ <input type="radio"/> L <input type="radio"/> R <input type="radio"/> Arthrogram (if indicated)	X-RAY Views _____ <input type="radio"/> Body part _____
BODY Specify target organ: _____ <input type="radio"/> Chest <input type="radio"/> Pelvis	
OTHER <input type="radio"/> Screening to rule out metal (x-ray or CT as available) <input type="radio"/> Other _____	

Provider name (print)	Provider location City/Zip	Phone #
Provider signature (required) <i>Do not use rubber stamp.</i>	NPI # (required)	Date

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Open Upright MRI of Missouri

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From the North

Take Interstate 270 south and take exit 14 for Olive Blvd./MO-340 E. Turn left on N. New Ballas Rd., then make an immediate right into our center parking lot. We are next to the Aldi grocery store.

From the West

Take Interstate 64 east to Interstate 270 north. Take exit 14 to merge onto Olive Blvd./MO-340 E. Turn left on N. New Ballas Rd., then make an immediate right into our center parking lot. We are next to the Aldi grocery store.

From the East

Take Interstate 64 west to Interstate 270 north. Take exit 14 to merge onto Olive Blvd./MO-340 E. Turn left on N. New Ballas Rd., then make an immediate right into our center parking lot. We are next to the Aldi grocery store.

From the South

Take Interstate 270 north and take exit 14 for Olive Blvd./MO-340 E. Turn left on N. New Ballas Rd., then make an immediate right into our center parking lot. We are next to the Aldi grocery store.