



**Clearer Images,
Better Diagnoses**

PRINTED FROM WEBSITE

Schedule your patients online at:
www.TeslaMRI.com/scheduling

(833) TESLA-MRI
Fax: (833) 399-4122
Email: Scheduling@TeslaMRI.com

PATIENT INFORMATION

PATIENT NAME: _____ SEX: ☐ M ☐ F
ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____
CELL PHONE: _____ SOCIAL SECURITY #: _____ DATE OF BIRTH: _____
DATE OF INJURY (IF APPLICABLE) _____ HOSPITALIZED: ☐ YES ☐ NO PACEMAKER: ☐ YES ☐ NO
TRANSPORTATION NEEDED: ☐ YES ☐ NO ☐ STAT

INSURANCE INFORMATION

INSURED: _____ RELATIONSHIP: _____ IF NOT SELF, THEN: _____
INSURANCE COMPANY: _____ TYPE: ☐ PIP ☐ SELF PAY ☐ WORK COMP ☐ OTHER: _____
CLAIM #: _____ POLICY #: _____ PRIOR AUTHORIZATION (IF APPLICABLE) _____
ATTORNEY (IF APPLICABLE) _____ ATTORNEY PHONE #: _____
LAW FIRM (IF APPLICABLE) _____

Kendall Location Only

CT SCAN

☐ BRAIN (HEAD)	☐ CERVICAL	☐ SHOULDER	R ____ L ____	☐ HIP	R ____ L ____
☐ PITUITARY	☐ THORACIC	☐ HUMERUS	R ____ L ____	☐ FEMUR	R ____ L ____
☐ ORBITS	☐ LUMBAR	☐ ELBOW	R ____ L ____	☐ KNEE	R ____ L ____
☐ SINUSES	☐ PELVIS	☐ RADIUS/ULNA	R ____ L ____	☐ TIB/FIB	R ____ L ____
☐ NECK SOFT TISSUE	☐ ABDOMEN	☐ WRIST	R ____ L ____	☐ ANKLE	R ____ L ____
☐ CALCIUM SCORE	☐ CHEST	☐ HAND	R ____ L ____	☐ FOREFOOT	R ____ L ____
☐ OTHER: _____	☐ FINGERS	R ____ L ____	☐ TOE(S)	R ____ L ____	

CTA

☐ HEAD W/3D CIRCLE OF WILLIS
☐ NECK CAROTIDS
☐ CHEST - PULMONARY EMBOLISM
☐ CHEST - THORACIC AORTA
☐ ABDOMEN
☐ ABDOMINAL AORTA
☐ PELVIS

X-RAY SCAN

☐ CERVICAL	☐ SHOULDER	R ____ L ____	☐ HIP	R ____ L ____	☐ RIBS R ____ L ____
☐ THORACIC	☐ ELBOW	R ____ L ____	☐ FEMUR	R ____ L ____	☐ BONE AGE STUDY
☐ LUMBAR	☐ HAND	R ____ L ____	☐ TIB/FIB	R ____ L ____	☐ PELVIS
☐ SKULL	☐ FINGER(S)	R ____ L ____	☐ ANKLE	R ____ L ____	☐ ABDOMEN
☐ CHEST (CXR)	☐ HUMERUS	R ____ L ____	☐ FOOT	R ____ L ____	DECUBS ____ KUB ____ 2 VIEWS ____
1 VIEW ____ 2 VIEWS ____	☐ RADIUS/ULNA	R ____ L ____	☐ TOE(S)	R ____ L ____	☐ OTHER _____

MRI EXAM

☐ WITHOUT CONTRAST ☐ WITH AND WITHOUT CONTRAST

HEAD	SPINE	UPPER EXTREMITY	LOWER EXTREMITY	BODY
☐ NECK SOFT TISSUE	☐ CERVICAL	☐ SHOULDER R ____ L ____	☐ HIP R ____ L ____	☐ CHEST
☐ TMJ R ____ L ____	☐ THORACIC	☐ HUMERUS R ____ L ____	☐ FEMUR R ____ L ____	☐ BREAST
☐ MRA HEAD	☐ LUMBAR	☐ ELBOW R ____ L ____	☐ KNEE R ____ L ____	☐ BRACHIAL PLEXUS
☐ MRA CAROTID	☐ SACRUM/COCCYX	☐ RADIUS/ULNA R ____ L ____	☐ TIB/FIB R ____ L ____	☐ ABDOMEN
☐ IAC		☐ WRIST R ____ L ____	☐ ANKLE R ____ L ____	☐ MRCP
☐ PITUITARY		☐ HAND R ____ L ____	☐ FOREFOOT R ____ L ____	☐ PELVIS
☐ ORBITS		☐ FINGERS R ____ L ____	☐ TOES R ____ L ____	☐ OTHER _____
☐ SINUSES		☐ THUMB R ____ L ____		
☐ BRAIN				
☐ BRAIN + DTI				
☐ BRAIN + DTI + NEUROQUANT				

☐ EMC DIAGNOSIS IF MEDICALLY APPROPRIATE ☐ 3D RENDERING

MRI WITH IV CONTRAST: We don't administer contrast for patients with uncontrolled hypertension, diabetes, kidney issues, active sickle cell, or anyone over 60 years old. No patients taking Metformin.

DIAGNOSIS & MEDICAL NECESSITY: _____
REFERRING PHYSICIAN: _____ PHONE: _____ FAX: _____
PHYSICIAN SIGNATURE: _____ LICENSE #: _____ NPI #: _____

GENERAL INSTRUCTIONS

- ✓ To avoid delays, please bring prior related studies or films to the imaging center at the time of your appointment for comparison purposes.
- ✓ Leave your valuables at home prior to coming in for your exam.
- ✓ Please bring your insurance cards, driver's license, and referral form.

MRI SCANS

- ✓ No surgeries within 8 weeks prior to your MRI appointment. NO PACEMAKERS. If you have any type of stent, aneurysm clip, or any type of metal, please bring documentation identifying it. Bring all correlating films to the exam.
- ✓ Wear loose, light clothing (no metal zippers or buttons)

Location	3T MRI WIDE	3T MRI	1.5T MRI	OPEN MRI	DIGITAL X-RAY	FULL BODY MRI	DTI with NEUROQUANT	CT 128 SLICE
Boca Raton 3350 NW Boca Raton Blvd. Suite B10 Boca Raton, FL 33431		✓		✓	✓		✓	
Fort Myers 2215 Winkler Ave. Suite G Fort Myers, FL 33901			✓		✓	✓	✓	
Sweetwater 11251 NW 20 St. Unit 114 Sweetwater, FL 33172	✓				✓	✓	✓	
Aventura 20880 W Dixie Hwy. Unit 111 Aventura, FL 33180	✓			✓	✓	✓	✓	
Kendall / Dadeland 7867 N Kendall Dr. Suite 120 Kendall, FL 33156			✓					✓
Plantation 150 North University Dr. Suite 110 Plantation, FL 33324	✓			✓	✓	✓	✓	
Kissimmee 1011 W. Carroll St. Kissimmee, FL 34741	✓				✓	✓	✓	
Lake Mary 605 Crescent Executive Ct. Suite 124, Building 3 Lake Mary, FL 32746	✓				✓	✓	✓	

- Powered by Artificial Intelligence to reduce scan time and improve image quality -

Tesla MRI Locations:

- 📍 2215 Winkler Ave Suite G, Fort Myers, FL 33901
- 📍 11251 NW 20 St Unit 114, Sweetwater, FL 33172
- 📍 7867 N Kendall Dr., Suite 120, Kendall, FL 33156
- 📍 20880 W Dixie Hwy., Unit 111, Aventura, FL 33180
- 📍 3350 NW Boca Raton Blvd., Suite B10, Boca Raton, FL 33431
- 📍 150 North University Dr., Suite 110, Plantation, FL 33324
- 📍 1011 W. Carroll St., Kissimmee, FL 34741
- 📍 605 Crescent Executive Ct, Suite 124, Building 3, Lake Mary, FL 32746

Leading the Way in MRI Technology:
Experience Unmatched Precision with Us!

