

Appointment Date and Time _____

Patient Name (as shown on insurance card)		Cell Phone	Home Phone
Patient DOB	<input type="radio"/> Male <input type="radio"/> Female	Patient Height	Patient Weight
Primary Insurance	Group	Insurance ID	Precertification
Secondary Insurance	Group	Insurance ID	Precertification
Primary Care Provider Name		Phone	Fax
Referring Medical Provider Name		Phone	Fax
Referring Medical Provider Signature _____			

Provider signature required. Do not use rubber stamp.

Clinical Indications _____

Indicate (re: cancer) History of, or Recurrent

Diabetic Insulin Glucophage Other Meds _____

Previous Nuclear Medicine/CT/MRI/Pet Scans _____

When _____

Where _____

Outside film availability _____

Previous chemo/radiation therapy _____

When _____

Where _____

Scan Type* PET/CT Whole Body PET/CT Standard Body (Eyes to Thighs) PET/CT Neurology PET/CT Cardiac Viability

**NPO 4 hours prior for Whole Body and Nuero exams. Instructions for Cardiac provided on screening*

Patients must be 4 weeks S/P chemo or radiation therapy, ideally

Patients are required to bring outside films. Physican's offices are required to fax the appropriate surgical, pathology and diagnostic reports. Please fax a copy of patient's insurance card.

*PET scans require pre-authorization: **TABLE LIMIT 450LBS***

Mid Coast Hospital
123 Medical Center Dr.
Brunswick, ME 04011
NPI: 1285682591

St. Mary's Regional Medical Center
93 Campus Ave.
Lewiston, ME 04240
NPI: 1972551299

Pen Bay Medical Center
6 Glen Cove Drive
Rockport, ME 04856
NPI: 1184161085

Southern Maine Medical Center
1 Medical Center Dr.
Biddeford, ME 04005
NPI: 1548219579

Waldo County General Hospital
118 Northport Ave.
Belfast, ME 04915
NPI: 1659329985

Note: For AIM and MaineCare please use our NPI number when ordering.