

East Texas

**OPEN MRI
& DIAGNOSTICS**

232 North John Redditt Dr. Lufkin, Texas 75904
Phone: (936) 699-2798 Fax: (936) 699-2885

Patient Name: _____

Patient Home Phone: _____ Work Phone: _____

Exam Date: _____ Exam Time: _____

MRI or MRA*
(Brain only)

CT Scan

X-Ray**

Examination Requested _____

Clinical Findings or Diagnosis _____

Referring Physician _____

Phone # _____ Fax # _____

Call Report

Fax Report

Copy of Films

* MRI Patient – We may not be able to perform your study if you have aneurysm clips, pacemakers, metal in body or metal in either eye.

** X-Ray Patient -- Please notify our office if there is any possibility that you are pregnant.

All patients – Please report 20 minutes prior to scheduled study. If you are unable to make your appointment, please notify us in advance (24 hours if possible).

**PLEASE BRING PRIOR FILMS
PLEASE NOTIFY US OF ANY ALLERGIES**