

Central Scheduling: 704-384-7226
Central Scheduling Fax: 704-384-8511

Rowan Scheduling: 704-210-7762
Rowan Scheduling Fax: 704-210-6631

☐ STAT (Please call to schedule before faxing.) Direct cell phone number for ordering provider: _____

Appointment date: _____ Appointment time: _____ Check-in time: _____ Today's date: _____

Patient's name: _____ DOB: _____

Patient primary phone number: _____ Secondary: _____

Diagnosis codes/Clinical indications ("rule out" not valid diagnosis): _____

Comments: _____

Does patient have prior images? ☐ YES ☐ NO Prior imaging performed at: _____

Insurance carrier: _____ Auth #: _____ Auth facility: _____ Auth exp: _____

Novant to obtain auth? ☐ Yes ☐ No If yes, include all clinical notes and insurance card(s). If no, provide auth info above.

Office phone #: _____ Office fax #: _____

Provider name (printed): _____ Provider signature: _____

MRI		CT					
Contrast: ☐ Without and With ☐ Without	Extremity/Joint ☐ MRI ☐ CT Ankle R L B ☐ MRI ☐ CT Elbow R L B ☐ MRI ☐ CT Hand R L B ☐ MRI ☐ CT Foot R L B ☐ MRI ☐ CT Knee R L B ☐ MRI ☐ CT Wrist R L B ☐ MRI ☐ CT Shoulder R L B ☐ MRI ☐ CT Hip R L B ☐ MRI ☐ CT Other: _____ ☐ 3-D Reconstruction	Contrast: ☐ Without ☐ With ☐ Without & With If more than 1 CT ordered, write contrast choice beside procedure.	Head/Neck ☐ Head/Brain w/o ☐ Facial ☐ Orbits ☐ Temporal bones ☐ Paranasal sinus ☐ Paranasal sinus stereotactic Protocol: _____ ☐ Neck w/				
Head ☐ Brain ☐ TMJ (Bilateral) ☐ IAC's 7 th & 8 th nerve wo/w ☐ Orbits wo/w ☐ Pituitary/Sella wo/w ☐ Trigeminal nerve wo/w	Abdomen/Pelvis ☐ Adrenals w/wo ☐ Kidneys w/wo ☐ Liver w/wo ☐ MRCP ☐ MRE small bowel w/wo ☐ Pancreas w/wo ☐ Pelvis bony ☐ Pelvis internal w/wo ☐ Prostate w/wo	Abdomen/Pelvis ☐ Abdomen w ☐ Abdomen w/o ☐ Abdomen Pelvis w ☐ Abdomen/Pelvis w (Enterography) ☐ Adrenal (Abd wo/w) ☐ Liver (Abd wo/w) ☐ Pancreas (Abd wo/w) ☐ Pelvis for fracture w/o ☐ Pelvis w ☐ Pelvis w/o ☐ Renal Hematuria Protocol (Abd/Pel wo/w) ☐ Renal Mass Protocol (Abd wo/w – Pel w) ☐ Renal Stone Protocol (Abd/Pel wo/w)	Spine ☐ Cervical ☐ Thoracic ☐ Lumbar ☐ Spine screen (limited C, T, L spine, & sacrum)	MRA (wo/w contrast) ☐ Aorta (abdominal) ☐ Aorta (thoracic) ☐ Brain-Circle of Willis wo contrast ☐ Carotids (neck) ☐ Stroke Protocol (MR Brain wo/w, MRA carotid wo/w & MRA head wo) ☐ Renals ☐ Peripheral	PET/CT ☐ Skull Base to Thigh ☐ Whole Body ☐ Brain ☐ Amyvid ☐ PSMA ☐ NET ☐ Cerianna ☐ Cardiac Sarcoidosis ☐ Other: _____	Chest ☐ Chest w/ ☐ Chest w/o ☐ Chest Hi-res no IV contrast	CT Angiography (wo/w) ☐ Abdomen ☐ Aorta (Abd/Pel) ☐ Stent Graft protocol (Abd/Pel) ☐ Head-Circle of Willis ☐ Neck Carotid Arteries ☐ Run off ☐ Chest/CTPS- Pulmonary Embolus ☐ Chest
Radiographic Studies ☐ DEXA – Bone Density (Forearm if needed) ☐ X-Ray _____							
Nuclear Medicine		Ultrasound *indicates patient must be NPO					
☐ Bone scan Whole Body ☐ Bone scan 3 Phase ☐ WB Bone scan with SPECT ☐ Hepatobiliary (Gallbladder w/EF) ☐ Hepatobiliary (biliary leak)	☐ Renal Flow/Function w/ Lasix ☐ Renal Flow/Function w/o Lasix ☐ Gastric emptying scan ☐ Thyroid Uptake & Scan ☐ MUGA	☐ VQ Lung scan (Chest XR if needed) ☐ I-131 total body ☐ I-123 total body ☐ Other:	Abdominal ☐ * Abdomen (includes aorta, CBD, GB, IVC, Kidneys, liver, pancreas, spleen) ☐ * Aorta only ☐ Gallbladder/Liver (RUQ) ☐ * Liver elastography ☐ * Renal (Kidneys& bladder) ☐ Spleen only				
Fluoroscopy *indicates patient must be NPO ☐ *Barium Enema w/o air ☐ Barium Swallow ☐ Chest (Sniff Test) ☐ Cystogram		Vascular ☐ Venous Doppler (r/o DVT) ☐ Arm R L B ☐ Leg R L B ☐ Arterial-PVR with ABIs ☐ ABI only ☐ Arterial limited ☐ Carotid ☐ Mesenteric artery ☐ Renal artery ☐ Portal Vein					
Breast Imaging ☐ 3D Screening Mammogram ☐ Diagnostic Mammogram (US if needed) R L B Is this a call back from a screening? Yes/No ☐ Breast Ultrasound limited (Diag. mammo if needed) R L B ☐ Breast MRI wo/w ☐ Abbreviated screening breast MRI wo/w ☐ Implant rupture wo/w		Neck ☐ Thyroid ☐ Soft tissue neck					
Interventional Radiology ☐ Arteriogram ☐ Ablation ☐ Biopsy ☐ Other: ☐ Port placement ☐ Chest ☐ Arm ☐ PICC R L ☐ Uterine fibroid embolization		MSK (COH only) ☐ Upper extremity: _____ ☐ Lower extremity: _____					
		Other ☐ Axilla (non-breast) R L B ☐ Superficial mass soft tissue, specify: _____ ☐ Biopsy: _____ ☐ Other: _____					

Novant Health imaging center locations

Novant Health freestanding imaging centers

Novant Health Imaging Ballantyne
14215 Ballantyne Corporate Place
Suite 140A
Charlotte, NC 28277

Novant Health Imaging Cabarrus
13460 Plaza Road Extension, Suite 150
Charlotte, NC 28215

Novant Health Imaging Gastonia
920 Cox Road, Suite 101
Gastonia, NC 28054

Novant Health Imaging Mooresville
118 Gateway Boulevard, Suite E
Mooresville, NC 28117

Novant Health Imaging Steele Creek
13557 Steelescrot Parkway, Suite 1100
Charlotte, NC 28278

Novant Health Imaging SouthPark
6324 Fairview Road, Suite 120
Charlotte, NC 28210

Novant Health outpatient hospital imaging departments

Novant Health Imaging Julian Road²
514 Corporate Circle
Salisbury, NC 28147

Novant Health Imaging Monroe¹
2000 Wellness Boulevard, Suite 110
Monroe, NC 28110

Novant Health Huntersville Outpatient 3T MRI³
10030 Gilead Road, Suite B100
Huntersville, NC 28078

Novant Health Imaging Museum¹
2900 Randolph Road
Charlotte, NC 28211

Novant Health Imaging University¹
8401 Medical Plaza Drive, Suite 110
Charlotte, NC 28262

Novant Health breast imaging locations

Novant Health Breast Center Lillington
315 Lillington Avenue
Charlotte, NC 28204

Novant Health Breast Center at Ballantyne Medical Center⁶
10905 Providence Road West
Suite 250
Charlotte, NC 28277

Novant Health Breast Center Ballantyne
14215 Ballantyne Corporate Place
Suite 140B
Charlotte, NC 28277

Novant Health Breast Center Matthews⁵
1500 Matthews Township Parkway
Matthews, NC 28105

Novant Health Breast Center Huntersville³
10030 Gilead Road, Suite 330
Huntersville, NC 28078

Novant Health Imaging SouthPark Breast Center
6324 Fairview Road, Suite 105
Charlotte, NC 28210

Novant Health Breast Imaging Center Langtree
106 Langtree Village Drive, Suite 201
Mooresville, NC 28117

Novant Health Breast Center Julian Road²
514 Corporate Circle
Salisbury, NC 28147

Novant Health Breast Imaging Center Mint Hill⁴
8201 Healthcare Loop, Suite 301
Charlotte, NC 28215

Additional screening mammogram locations:

Novant Health Imaging Monroe¹,
Novant Health Imaging Museum¹,
Novant Health Imaging University¹,
Novant Health Imaging Steele Creek

Novant Health hospital imaging departments

Novant Health Presbyterian Medical Center
200 Hawthorne Lane
Charlotte, NC 28204

Novant Health Huntersville Medical Center
10030 Gilead Road
Huntersville, NC 28078

Novant Health Matthews Medical Center
1500 Matthews Township Parkway
Matthews, NC 28105

Novant Health Charlotte Orthopedic Hospital
1901 Randolph Road
Charlotte, NC 28207

Novant Health Rowan Medical Center
612 Mocksville Avenue
Salisbury, NC 28144

Novant Health Mint Hill Medical Center
8201 Healthcare Loop
Charlotte, NC 28215

Novant Health Ballantyne Medical Center
10905 Providence Road West
Charlotte, NC 28277