Imaging for a healthier future

Future Diagnostics Group

& Women's Center for Breast Health

www.futurediagnosticgroup.com

Phone: 815.730.3344

Fax: 815.730.3888

DIAGNOSTIC IMAGING REFERRAL FORM

Patient Name: ______________________ Telephone: __________

Date of Birth: ______________________ Appt. Date: __________

Referring Dr: ______________________ Appt. Time: __________

Referring Dr Tel: ______________________ Fax: __________

☐ Bill Patient ☐ Bill Doctor

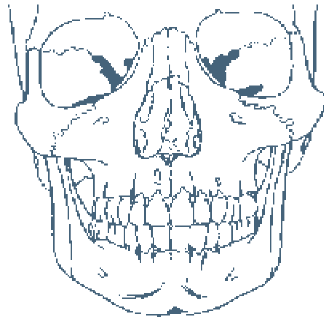
3-D Cone Beam Volumetric Imaging

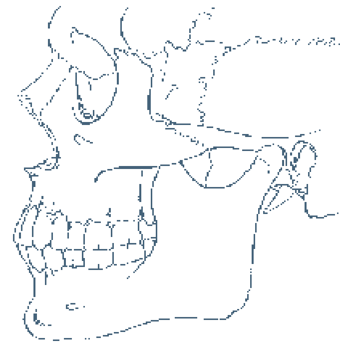
This service includes one CBVI imaging session, image file complete with viewer and a printed set of reformatted images. (Turnaround time is 3 business days after the date of scan. Please call our office to make special arrangements for RUSH scans).

☐ Implants ☐ Dental Impaction ☐ Airway Assessment ☐ Sinus Exam

☐ TMJ Exam ☐ Oral Pathology ☐ Endodontics ☐ Other

Please circle Region of Interest (ROI)





Other Services

☐ Orthodontic Anatomodel: indexed facial photo, virtual models, includes software viewer, volume views of skull and detention, lateral cephalogram with digital tracing.

☐ NobelGuide™ Conversion ☐ Simplant™ Conversion

☐ Radiology Report ☐ Additional Printed Reports (specify number ______)

Special Instructions: ____

____

Dr. Name: ____

Date: ______________________ Dr's Signature: ______________________

FDG Imaging Centers

☐ Joliet

254 N. Republic Ave.
Joliet, IL 60435
Phone: 815.730.3344
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*see over for map

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