

## Cardiac MRI Referral Form: Fax to 301-896-7521

**PLEASE ATTACH COPIES OF RECENT OFFICE NOTES, IMAGING STUDIES, LIST OF MEDICATIONS/ALLERGIES AND RECENT LABS (RENAL AND LIPIDS)**

Thank you for referring your patient to the NIH-Suburban Cardiovascular MRI program. This form is to help us schedule your patient, and to ensure that a report is faxed to your office in a timely manner. After receiving the referral information, we will contact your patient and coordinate scheduling at their convenience. **PLEASE DO NOT HAVE YOUR PATIENT CALL US BEFORE WE HAVE RECEIVED YOUR REFERRAL.** We do not need any insurance information or authorization forms.

Date: \_\_\_\_\_

Patient: \_\_\_\_\_  
(First) (Middle) (Last)

DOB: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone (H): \_\_\_\_\_

(Cell): \_\_\_\_\_

(Work): \_\_\_\_\_

Clinical Indication/Cardiac History:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

History of Claustrophobia? Yes No

Assessment(s):

( ) Function ( ) Viability/Infarct  
( ) Valvular ( ) Congenital  
( ) ARVD ( ) Thrombus/Mass  
( ) Aorta ( ) Ischemia/Stress  
( ) \_\_\_\_\_

Urgency: ( ) Routine: within 2-4 wks  
( ) Urgent: within 1 week\*\*

\*\*CALL WHEN FAXING URGENT REQUESTS

Referring MD: \_\_\_\_\_

Office Phone: \_\_\_\_\_

Office Fax: \_\_\_\_\_

Other MD (name/fax) to copy report:  
\_\_\_\_\_

**MRI Contraindications/Relative Contraindications:**

- 1) Brain aneurysm clips
- 2) Implanted neural stimulator
- 3) Implanted cardiac pacemaker or defibrillator
- 4) Cochlear Implant
- 5) Ocular foreign body (e.g. metal shavings)
- 6) Insulin pump (must remove for scan)
- 7) Metal shrapnel or bullet
- 8) Pregnant women (Patients who are uncertain as to whether they are pregnant will be required to have a screening urine or blood pregnancy test)
- 9) Patients with surgery of uncertain type.

**Furthermore, the following patient groups will be excluded from studies involving the administration or MRI contrast agents:**

- 1) Lactating women (unless willing to discard milk for 24 hours)
- 2) Renal disease (eGFR < 30)

Please feel free to page Andrew Arai, MD at 301-496-1211 (NIH page operator) or call W. Patricia Bandettini, MD at 301-896-4008 if you have any questions about the contraindications or capabilities of MRI.