

## APPOINTMENT

Date: \_\_\_\_\_ Check-in time: \_\_\_\_\_

## PATIENT INFORMATION

Patient Name (first, MI, last): \_\_\_\_\_ D.O.B.: \_\_\_\_\_

Phone: \_\_\_\_\_ Interpreter Needed (language): \_\_\_\_\_

Gender:  Male  Female Height (inches): \_\_\_\_\_ Weight (pounds): \_\_\_\_\_

Diabetic:  No  Yes If yes, how is diabetes controlled:  Diet  Oral medications  Insulin

Claustrophobic:  No  Yes Incontinence or urinary retention:  No  Yes

Pregnant, breast feeding, or postpartum:  No  Yes If yes, explain: \_\_\_\_\_

Insurance (copy and fax front and back of card): \_\_\_\_\_

Referring Provider: \_\_\_\_\_ Office Contact: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

## REQUIRED DOCUMENTATION

Insurance coverage for PET scans is limited and must typically be pre-authorized by the patient's insurance carrier. Please provide the following:

- Patient demographics/fact sheet.
- Copy of insurance cards, both sides.
- H & P or chart notes supporting medical necessity.
- Reports from previous imaging studies.
- Recent labs and pathology (if available).

## CLINICAL HISTORY/SIGNS AND SYMPTOMS

Medicare and other insurers require coding of specific/definitive diagnosis(es), sign(s), or symptom(s) to reflect the "medical necessity" for each test. "Rule out," "possible," or "probable" conditions cannot be coded. For Medicare policy information, visit [noridian.com/medweb](http://noridian.com/medweb).

Diagnosis/reason for exam: \_\_\_\_\_ ICD-10 Code(s): \_\_\_\_\_

What is the clinical question to be answered? \_\_\_\_\_

## PET/CT EXAM

- Whole Body  
Skull base to mid-thigh: CPT code 78815 -or-  
Whole Body: CPT code 78816  
(determination based on diagnosis and medical history)  
Please check if this scan is for:  initial treatment  subsequent treatment
- Axumin (Fluciclovine): for prostate cancer
- Netspot (Dotatate): for neuroendocrine tumors
- Brain Scan: CPT Code 78608  
 FDG (Fluorodeoxyglucose)  
 Amyvid (Florbetapir)
- Cardiac Viability: CPT Code 78459
- NaF-18 Bone Scan: CPT Code 78816
- Other: \_\_\_\_\_

## DIAGNOSTIC CT\*

Contrast at radiologist discretion  No contrast

- Head
- Neck
- Chest
- Abdomen
- Pelvis
- Abdomen and Pelvis
- Other: \_\_\_\_\_

*\*Please note that a non-diagnostic, non-contrast CT scan is performed as part of every oncology PET/CT scan. Choose a Diagnostic CT only if a CT with diagnostic quality is desired.*

## PET/CT EXAM PREPARATIONS

If you have questions about your appointment and/or prep instructions, please call a Prior Authorization Specialist at 253-761-4200, extension 6+7603, or toll-free at 866-761-4200, extension 6+7603.

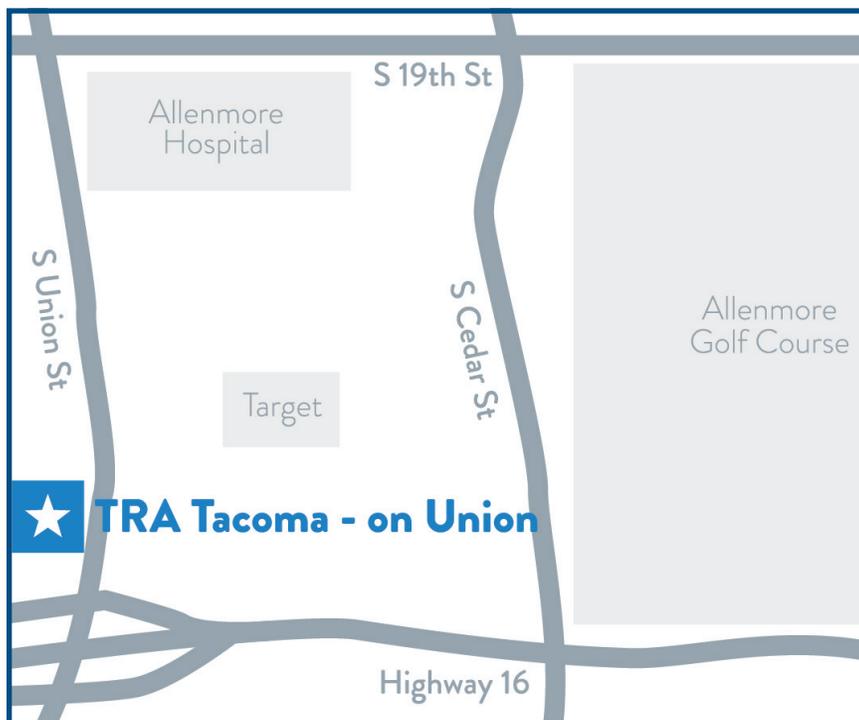
\*Please be advised that prep instructions may vary for appointment check-in times **after 2pm**.

### • **NOTHING TO EAT OR DRINK (EXCEPT WATER) AFTER MIDNIGHT**

- You are encouraged to drink water before your exam, but only plain water (i.e., non-carbonated, no flavor or additives, etc.). Anything else may adversely effect exam quality.
- All necessary medications, except diabetes medications, steroids and multi-vitamins, may be taken with plain water.
- If you are diabetic, **do not** take your morning diabetes medicine. If you need insulin in the morning, call a TRA Prior Authorization Specialist at least **two days** before your exam and we will arrange the best schedule for you.
- No coffee, gum, breath-mints, cough drops, or cough syrup the day of your exam.
- No strenuous exercise before your exam.
- The PET/CT scanner room is air-conditioned; please wear long sleeves. Sweat suits work well.
- No metal such as zippers, metal buttons, etc. You can change into a gown if needed.
- Please bring a list of all medications you currently take.

The PET Scan is a time sensitive procedure. It is important you are on-time to your check-in. If you must cancel or reschedule please notify us **24 hours** in advance so we can cancel the radioactive compound which has been ordered specifically for your exam.

Please note: the entire visit (check-in to exit) takes from 2 to 2.5 hours.



## DIRECTIONS TO CLINIC

### TRA Tacoma - on Union

2502 S Union Avenue  
Tacoma WA 98405

### From North or South I-5

- Take Exit 132 and merge onto Hwy 16 W
- Take the Union Ave exit
- Turn right onto Union Ave
- Turn left into our driveway (≈ 0.13 miles) and an immediate left into our parking lot

### Additional Details:

We are located across the street from the Target shopping center and share a driveway with the 2420 medical building.